

**Population and Social Processes Branch
Section: Demography**

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PUBLIC ABSTRACTS

Grant: 5D43TW001586-04
Program Director: SHRESTHA, LAURA B
Principal Investigator: PALLONI, ALBERTO MA
Title: INTERNATIONAL TRAINING IN POPULATION HEALTH
Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI
Project Period: 2000/10/01-2005/04/30

We propose the creation of an international and interdisciplinary training program in population and health. The program will be articulated around four research themes (health status, disability and well-being of the elderly; maternal and child health; family and household organization and health; and health conditions of populations under stress), will include pre and post-doctoral training components as well as retraining of former fellows, and will be developed within an institutional framework resting on three existing training programs at the University of Wisconsin housed, respectively, in the Center for Demography and Ecology (CDE), The Center for Demography of Health and Aging (DHA) and the Department of Preventive Medicine (PH), and on six training centers abroad, one in Brazil (Center for Demography and Regional Planning (CDEPLAR), University of Minas Gerais), one in Costa Rica (Central American Population Program, (PCP), Universidad de Costa Rica), one in Vietnam (Institute of Sociology, University of Hanoi) and two in China (Population Research Center at People's University and Training Center for Health Management, School of Public Health at Beijing Medical University). The proposed program includes innovative components regarding overall guidance and direction, administration of operations, articulation of curricular offerings, and degree pathways and mechanisms to ensure integration of faculty and students in all participating programs. The organization backbone of the program will be CDE, a well established center with a long tradition of training and research in the field.

Grant: 5D43TW000633-09
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: POPKIN, BARRY M PHD
Title: INTERNATIONAL TRAINING IN POPULATION, HEALTH AND AGING
Institution: UNIVERSITY OF NORTH CAROLINA CHAPEL HILL, NC
HILL
Project Period: 2000/09/29-2005/04/30

DESCRIPTION: (Adapted from the Applicant's Description) Researchers at the Carolina Population Center (CPC) of the University of North Carolina at Chapel Hill (UNC-CH) have established a set of collaborations in international settings to study population and health issues associated with rapid societal change, the environment, and the long-term effects of fetal and infant under nutrition. Our collaborations are unique in that they are organized around long-term collaborative projects that include longitudinal data collection as well as broadly based substantively oriented research on a wide variety of topics. The collaborators are eminent research institutions in China (Chinese Academy of Preventive Medicine, Beijing; CAPM); the Philippines (Office of Population Studies at the University of San Carlos, OPS); Thailand (Institute of Population and Social Research, Mahidol University; IPSR); Russia (the Russian Institute of Nutrition, Russian Academy of Medical Sciences (RIN) and Institute of Sociology, Russian Academy of Science (IS); and Ecuador (Fundacion Ecociencia, hereafter Ecociencia) and Centro de Estudios sobre Poblacion y Desarrollo Social (Center for the Study of Population and Social Development, or CEPAR.

The proposed grant consists of mix of short-, medium-, and long-term training of researchers, graduate students, and established scholars. The current and proposed Fogarty support made it possible to have wide-ranging discussions with our collaborators about broader institutional goals and the types of skills and capacity they would like to develop, and to act on those discussions. This proposed continuation grant allows us to further both our broad-based and specific training goals by bringing faculty from UNC-CH or elsewhere to their institutions, by having our collaborators come to UNC, or by sending them to regional workshops. These efforts resulted in development of skills in state of the art measurement and analytic techniques and publications in top international journals. We were also able to help recent Ph.D.'s from UNC-CH to establish research programs and facilities in their home institution, facilitating their return and future productivity. Based on the success of the first Fogarty grant, we propose a second that will consolidate and extend the gains made so far in our collaborations with the CAPM, OPS and IPSR and to broaden our reach through the addition of two new collaborating countries with two institutions in Ecuador and Russia.

Grant: 5D43TW000657-09
Program Director: SHRESTHA, LAURA B
Principal Investigator: THORNTON, ARLAND PHD
Title: POPULATION RESEARCH AND TRAINING IN DEVELOPING COUNTRIES
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 1995/09/30-2005/04/30

This proposal outlines an international population training program that continues and expands Michigan's Population Studies Center's current program supported by the Fogarty International Center of NIH. The goal of the program is to enhance qualitative and quantitative demographic research in the partner countries through a variety of collaborative activities. The program proposed here continues activities in China, Nepal, Thailand, and Vietnam, and adds two new partner countries to the program, South Africa and Brazil. These countries are chosen for several reasons. First, a training program of this type can have a large impact on each country's research infrastructure and policy environment. Second, there are common substantive themes and methodological approaches that connect current PSC research in these countries. Third, the countries are at different stages of social and economic development and lend themselves to informative comparative analysis. The program builds on current PSC research projects analyzing intergenerational support and old-age security in Asian countries; the effect of economic transitions on the condition of children, young adults and the elderly in Brazil, South Africa, China, and Vietnam; and the evolutionary foundations of life cycle patterns in fertility in mortality. The program takes advantage of Michigan's strengths in qualitative and quantitative populations research and long experience in international population training. The program will include regular Ph.D. training, short-term training through classes and collaborative research, and workshops and collaborative research conducted by PSC faculty in the countries. The major emphasis is on short-term training of predoctoral and postdoctoral visitors, taking place at Michigan in the designated countries. Short-term training at Michigan will take advantage of classes taught by PSC faculty and the University's well-known summer courses conducted by ICPSR and SRC. This formal coursework will be combined with collaborative research activity designed to give students and population professionals hands-on training in the latest developments in qualitative and quantitative social research methods. Training in the foreign countries will take place through workshops conducted by PSC faculty and collaborative research projects. The Center has had great success with both of these approaches to short-term collaborative training of population professionals from developing countries.

Grant: 5D43TW000655-09
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: ZUBERI, TUKUFU PHD SOCIOLOGY
Title: RESEARCH AND TRAINING PROGRAM IN POPULATION AND HEALTH
Institution: UNIVERSITY OF PENNSYLVANIA PHILADELPHIA, PA
Project Period: 1995/09/30-2005/04/30

This proposal requests renewal of the program in International Training and Research in Population and Health at the Population Studies Center of the University of Pennsylvania. A core faculty of eight investigators is proposed to carry out research and training activities focused on two regions: Sub-Saharan African and Latin America. Research and training will occur in the context of two major initiatives-the African Census Analysis Project and the Latin American Migration Project-and a variety of related other investigations being conducted by Penn faculty in these regions. We propose a program focused on four kinds of training. At the predoctoral level, we proposed supporting one African and one Latin American graduate fellow each year; at the postdoctoral level, we propose funding one African and one Latin American postdoc each year; we also envision a program of short training rotations of 1-6 months to enable researchers from Africa and Latin America to acquire specific skills and knowledge. Finally, we propose to hold one training or research workshop per year in each of the regions, to enable Latin American and African demographers to exchange research findings and other useful information that would enhance local research capabilities and lead to more effective international collaborations.

Grant: 5K02AG000979-05
Program Director: SHRESTHA, LAURA B
Principal Investigator: CARNES, BRUCE A BA
Title: BIODEMOGRAPHY OF GENETIC DISEASE
Institution: NATIONAL OPINION RESEARCH CENTER CHICAGO, IL
Project Period: 1999/05/01-2003/08/31

This Independent Scientist Award derives from an ongoing effort to investigate age patterns of mortality in populations from a biological perspective. Evolution theory predicts natural selection's ability to influence gene expression begins a decline at the age of sexual maturity that reaches negligible levels by the ages when reproduction ceases. This age gradient for selection permits the life span to be partitioned into biologically meaningful age ranges—a pre-reproductive period, a reproductive period, and a post-reproductive period. Biondemographic research influenced by evolution theory has led to a mortality classification that distinguishes between genetic and non-genetic causes of death and has generated predictions and testable hypotheses about the age distribution of deaths with a genetic etiology. Emerging research on the molecular etiology and pathogenesis of disease suggests that genetic diseases can be further partitioned into those that are heritable and those thought to arise from the accumulation of acquired genetic damage. This award is designed to permit the PI to permanently leave his position as a radiation biologist, move into research and teaching in the field of aging full-time, receive training in subjects relevant to biondemographic research, and pursue a series of research projects associated with the training that initially focus on the biondemography of genetic diseases in humans. The results derived from this award will have relevance for the estimation of lower limits to age-specific death rates, upper limits to human longevity, and forecasting life expectancy and the size of the older population.

Grant: 7K02AG000979-06
Program Director: SHRESTHA, LAURA B
Principal Investigator: CARNES, BRUCE A BA
Title: BIODEMOGRAPHY OF GENETIC DISEASE
Institution: UNIVERSITY OF OKLAHOMA HLTH OKLAHOMA CITY, OK
SCIENCES CTR
Project Period: 1999/05/01-2004/04/30

This Independent Scientist Award derives from an ongoing effort to investigate age patterns of mortality in populations from a biological perspective. Evolution theory predicts natural selection's ability to influence gene expression begins a decline at the age of sexual maturity that reaches negligible levels by the ages when reproduction ceases. This age gradient for selection permits the life span to be partitioned into biologically meaningful age ranges—a pre-reproductive period, a reproductive period, and a post-reproductive period. Biodemographic research influenced by evolution theory has led to a mortality classification that distinguishes between genetic and non-genetic causes of death and has generated predictions and testable hypotheses about the age distribution of deaths with a genetic etiology. Emerging research on the molecular etiology and pathogenesis of disease suggests that genetic diseases can be further partitioned into those that are heritable and those thought to arise from the accumulation of acquired genetic damage. This award is designed to permit the PI to permanently leave his position as a radiation biologist, move into research and teaching in the field of aging full-time, receive training in subjects relevant to biodemographic research, and pursue a series of research projects associated with the training that initially focus on the biodemography of genetic diseases in humans. The results derived from this award will have relevance for the estimation of lower limits to age-specific death rates, upper limits to human longevity, and forecasting life expectancy and the size of the older population.

Grant: 5K02AG000976-03
Program Director: SHRESTHA, LAURA B
Principal Investigator: GAVRILOV, LEONID A MS
Title: THE BIODEMOGRAPHY OF HUMAN LONGEVITY--A TRAINING PROGRAM
Institution: NATIONAL OPINION RESEARCH CENTER CHICAGO, IL
Project Period: 2001/04/15-2006/03/31

DESCRIPTION (applicant s abstract): The aim of this application is to permit the investigator with an opportunity to develop his career as an independent scientist in the biodemography of longevity. He has changed both his research approach (from studies of aggregated demographic life tables to the analysis of individual familial longevity records) and country of residence (immigrated to the United States from Russia). The investigator will undertake five years of training, study, research and career development to acquire enhanced research analytical skills in familial data analysis (event history analysis, multivariate survival analysis, multilevel modeling, population genetics), to strengthen his biosocial background and broaden his collaborative network with other U.S. investigators. His host organization, the Center on Aging at NORC/University of Chicago (UC), provides the investigator with an excellent working environment and strongly supports this application. In the proposed research, the investigator will fill a major gap in knowledge regarding long-term, postponed effects of delayed parenting on the life expectancy of adult offspring (life-shortening effects, expected from biological theories of aging). The specific aims of the proposed study are: (1) to determine whether persons born to older fathers have a shorter lifespan (expected as a result of the age-related accumulation of spontaneous mutations in paternal germ cells); to test his preliminary finding that only daughters born to older fathers have shorter lifespans (consistent with the critical importance of mutation load on the paternal X chromosome inherited by daughters only); (2) to analyze the maternal age effects on offspring longevity (in relation to the possible role of age-related accumulation of oxidative damage to mitochondrial DNA in maternal ova cells); (3) to examine the prediction of the X chromosome hypothesis that there should be a specific effect of late grandparental reproduction of maternal grandfathers only on grandsons'longevity; (4) to check the prediction of the parental support hypothesis that for longer lived parents the parental age effects will be less expressed. This research plan allows the investigator to acquire enhanced practical skills and research experience in advanced methods of multivariate statistics, data quality control and database management. The award allows the investigator not only to complete the proposed training and research projects, but also to develop a full-scale long-term research program in the biodemography of human longevity.

Grant: 5K07AG001015-04
Program Director: SHRESTHA, LAURA B
Principal Investigator: BLAU, DAVID M MA
Title: DEMOGRAPHY AND ECONOMICS OF AGING AND THE LIFE COURSE
Institution: UNIVERSITY OF NORTH CAROLINA CHAPEL CHAPEL HILL, NC
HILL
Project Period: 2000/09/30-2005/08/31

DESCRIPTION (adapted from the application): The goal of this K07 application is to promote research and research training on the demography and economics of aging at the UNC-CH. Support is requested for a program led by Dr. David Blau, a labor and population economist and professor of economics, and Dr. Edward Norton, a health economist and associate professor of health policy and administration, and administered through the Carolina Population Center (CPC). Specific activities to be pursued by the Demography and Economics of Aging Research (DEAR) program under K07 support are: (1) seed funding for pilot studies on issues in the demography and economics of aging intended to lead to grant applications submitted for external funding; (2) a seminar series on demography, and economics of aging research; and (3) travel awards to researchers to present findings at professional aging and gerontology meetings. External support for population aging studies will be combined with internal support to build a base of scientific interest and research and training capacity at UNC-CH. The CPC mission is to coordinate population research and research training at UNC-CH. Demographic and economics research on aging will be further enhanced by formal collaboration with the new state-legislated Institute on Aging (IOA), sited on the UNC-CH campus, that has a statewide mandate to promote gerontological research, translate research-based knowledge into educational and practice programs, and inform state policies and programs that address the needs of older adults and their families. The present offers an opportune time to promote demography and aging research at UNC-CH across departments, centers and institutes with a permanent IOA director in place and broad institutional support for research collaboration. K07 support will enable the formation of a visible scientific community of UNC-CH faculty committed to building a strong research program on population aging, an area to which there has been an increasing and recent university commitment of resources.

Grant: 5K07AG001055-03
Program Director: SHRESTHA, LAURA B
Principal Investigator: FERRARO, KENNETH F. MA
Title: INTERDISCIPLINARY RESEARCH ON LIFE COURSE INEQUALITY
Institution: PURDUE UNIVERSITY WEST LAFAYETTE WEST LAFAYETTE, IN
Project Period: 2001/03/01-2006/02/28

DESCRIPTION (from application): The overall aim of this project is to strengthen PU research and training on aging and life course inequality. While the University has a long history of research and instruction in gerontology, it has only recently developed an institutional structure to support interdisciplinary inquiry on aging for faculty and graduate students. This project is designed to build upon the recent institutional development by focusing research on life course analysis, especially inequality and cumulative disadvantage across the life course. This application is designed to enhance social and behavioral expertise on aging along two developmental loci. The first is to provide research development opportunities for faculty in the social and behavioral sciences. The second focus is graduate education. The project seeks to strengthen interdisciplinary initiatives in gerontology related to the professional and methodological training of graduate students. Specific aims of this project include: (1) To stimulate research on life course inequality by PU faculty and graduate students; (2) to enhance graduate education in social gerontology by further integrating theories and methods for the study of the life course; (3) to provide opportunities for faculty to participate in an interdisciplinary research program on life course inequality; and (4) to contribute to the scientific understanding of the antecedents and consequences of inequality across the life course. Specific mechanisms to achieve the research and training initiatives include the: formation of research clusters, pilot grant program, scientific advisory board review, symposium series, participation in summer intensive courses, minority student recruitment, and interdisciplinary educational opportunities for graduate students. The success of the program will be measured by multiple performance indicators such as refereed journal articles, extramural research funding, curriculum development, interdisciplinary doctoral committees, and placement of graduate students.

Grant: 5K07AG000892-05
Program Director: SHRESTHA, LAURA B
Principal Investigator: LAND, KENNETH C PHD
Title: ACADEMIC CAREER LEADERSHIP AWARD
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 1999/09/30-2004/08/31

Duke University requests funds for an Academic Career Leadership Award to Dr. Kenneth C. Land to further interdisciplinary research into the social demography, medical demography, biodemography, and economics/actuarial science of aging. Land's scientific contributions to demography, statistics, and sociology are widely recognized. His leadership skills have been tested and proven during three full terms as Chairman of the Sociology Department at Duke. He is a Senior Research Fellow in the Center for Demographic Studies and has had a long association with the current NIA-funded training program in the social and medical demography of aging which he now directs. The proposed project would build on the substantial portfolio of research projects underway on the medical demography, social demography, and actuarial science of aging at the Center, as well as on the large array of additional research on aging at Duke. This project would allow Professor Land to develop the institutional and network connections of the Center with a number of other programs at Duke and neighboring institutions; to improve the curriculum in the demography of aging for our training program as well as in related areas across a number of departments and schools; and to enhance the research capacity at Duke through increased interaction among researchers and through the provision of research support services, especially programming assistance to facilitate the use of several new, complex, and longitudinal datasets.

Grant: 5K07AG019165-02
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: WEINSTEIN, MAXINE A BS
Title: Infrastructure for Aging & Health Research
Institution: GEORGETOWN UNIVERSITY WASHINGTON, DC
Project Period: 2002/02/15-2007/01/31

DESCRIPTION (provided by applicant): Georgetown University is home to a diverse set of researchers who teach and do research in the field of aging. These investigators are in various departments in the Medical School and throughout the Main Campus. In order to provide a focus for these activities and encourage additional work in this area, this application requests funding for the development of infrastructure in support of research in aging and health. The primary objectives of this project are to 1) Build an intellectual home for research related to aging and promote the interdisciplinary exchange that will enrich the dimensionality and depth of that research; and 2) Enhance current and encourage new research on aging by supporting current researchers, by exploring and developing training opportunities for undergraduate and graduate students, and by providing for transdisciplinary training at student and professional level to develop ancillary skills. In support of these aims, we propose to 1) Develop a seminar series on aging; 2) Improve library resources and services; 3) Create a roster of active individuals and departments; 4) Develop a newsletter and web site; 5) Expand student outreach; and 6) Work with administration to bridge institutional boundaries. We are requesting funding to support the time of two members of a steering committee (the third will be supported by Georgetown University), a statistical consulting service and data core, two experienced consultants who will propose and evaluate activities, and a fund that will be used to encourage, via small grants, new initiatives in aging throughout the Georgetown community. Georgetown brings unusual resources to this enterprise. It has a well-established medical center that includes faculty from the school, the hospital, and Lombardi Cancer Center. The Georgetown Public Policy Institute, well-established departments in the social and biological sciences, the Kennedy Institute of Ethics, and the National Reference Center for Bioethics Literature are housed at Georgetown University.

Grant: 5K08AG019180-03
Program Director: SHRESTHA, LAURA B
Principal Investigator: LANGA, KENNETH M MD
Title: IDENTIFYING CASES AND COSTS OF DEMENTIA IN THE U.S.
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 2001/08/15-2006/07/31

DESCRIPTION (applicant s abstract): Dr. Kenneth Langa is a General Internist and faculty member in the Department of Internal Medicine and the Institute for Social Research at the UM. He gained research experience while earning a Ph.D. in Public Policy at the UC and completing the Robert Wood Johnson Clinical Scholars Program at the UM. During his fellowship training he initiated pilot studies on direct and informal caregiving costs of dementia while working as a Collaborator on the NIA-funded Health and Retirement Study (HRS). His immediate career goal is to obtain new clinical and research skills required for the longitudinal study of cognitive impairment in both clinical and population-based settings; his long-term goal is to lead multidisciplinary research efforts to better understand the social and economic impact of dementia on patients, families, and society. The UM provides a uniquely rich environment to support training in the study of aging and cognitive impairment. Dr. Langa will be mentored by senior faculty in the Institute for Social Research, Medical School, Michigan Alzheimer's Disease Research Center, and School of Public Health. He will benefit from his established collaborations with the principal investigator (Robert J. Willis, Ph.D.) and Co-Investigators of the HRS. The research plan will utilize 6 waves of HRS data (collected between 1993 and 2004) to study the direct and informal caregiving costs of cognitive impairment in a population-based nationally representative sample. The longitudinal design (with up to 11 years of follow-up) and extensive data on socioeconomic status, co-morbidities, and informal caregivers will be used to determine the relationship between severity of cognitive impairment (from mild or pre-clinical to severe disease) and direct and family caregiving costs. Longitudinal models will identify determinants of the incidence and progression of cognitive impairment, as well as nursing home admission and death. Markov models will be developed to estimate the lifetime costs associated with cognitive impairment, and determine the distribution of costs across age, gender, race, socioeconomic status, and public (Medicare and Medicaid) and private payers. This project will better define the economic impact of the growing prevalence of dementia in the United States, as well as the potential benefits of new treatments to prevent or slow the progression of this costly and increasingly common condition.

Grant: 5K08AG021616-02
Program Director: SHRESTHA, LAURA B
Principal Investigator: WONG, MITCHELL D BA
Title: Racial and Ethnic Disparities Health Policy Model
Institution: UNIVERSITY OF CALIFORNIA LOS ANGELES LOS ANGELES, CA
Project Period: 2002/09/30-2007/08/31

DESCRIPTION (provided by applicant): Dr. Wong is a general internist who seeks support for further training in Epidemiology, Demography and Markov modeling methods. His principal research goals are to understand the pathways contributing to the racial and ethnic disparities in health care and outcomes, including health-related quality of life and mortality, and to identify areas of health and specific interventions to most efficiently eliminate these disparities. Dr. Wong is well trained in Health Services research, having obtained a Ph.D. in this area from the UCLA School of Public Health. He is strongly committed to research in racial and ethnic disparities, focusing on chronic illnesses and their outcomes. Transitioning from work on specific diseases, such as HIV, Dr. Wong now pursues to create a comprehensive and multidisciplinary clinical model to understand how chronic diseases contribute to lower life expectancy among minorities. To obtain the advanced skills for this research, he is now applying for a career development award. The mentorship committee has been carefully selected to supervise Dr. Wong's training in Epidemiology, Demography and Markov modeling. This training includes coursework at UCLA in the School of Public Health and Sociology Department and self-directed tutorials in Demography and Markov modeling. As sponsor of the Mentored Clinical Scientist Development Award, Dr. Martin Shapiro will oversee his educational goals, career development and execution of his research plan. Dr. Eileen Crimmins, who is a Professor of Sociology and Gerontology with a degree in Demography, will also closely supervise the proposed research plan. The award will provide five years of supervised experience enabling Dr. Wong to develop his potential to become an independent investigator and a leader in health policy research related to racial and ethnic disparities in care. The overall objective of the research plan is to create a Markov cycle tree simulation model that will provide a broad clinical model of racial and ethnic disparities in mortality (Disparities Health Policy Model). Using this model, Dr. Wong will identify those diseases that contribute most to the disparities in mortality among African Americans, Latinos, and Asians compared to Whites. The Disparities Health Policy Model will also allow us to determine the degree to which the lower life expectancy among African-Americans can be attributed to a greater risk of getting a disease as opposed to a higher death rate from the disease once it has developed. Finally, we will use the model to predict the impact of selected clinical and policy interventions on the racial disparity in years of potential life lost.

Grant: 5K12AG000982-05
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MANTON, KENNETH G MA
Title: SCIENTIFIC RECRUITMENT FOR THE DEMOGRAPHY OF AGING
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 1999/09/30-2004/08/31

The goals of this project are to recruit three scientifically established senior scientists from relevant disciplines to five-year K-12 fellowships in which they will redirect their major career focus to studying the demography of aging and to conducting significant research in the demography of aging. To help these investigators make this professional and scientific transition, they will select (after interviewing with interested investigators) scientific mentors who currently have active NIA research projects on the Demography of Aging at CDS. They will participate in the research projects of the selected mentors in multiple ways. They will be involved in the conceptualization of specific substantive studies, in the collection and preparation of data, in the analysis of data, and in the preparation of articles and monographs for the scientific peer-reviewed literature. It is expected that the research base for these persons will be in the Center for Demographic Studies (CDS) at Duke University. It is also expected that they will develop (and will be aided in developing) appointments in one of the regular academic departments of Duke University. It is expected that they will involve graduate students and post-doctoral fellows in their own research on the demography of aging as it develops. It is also expected that they will generate significant NIA-funded research projects on the demography of aging on their own (i.e., as principal investigators) so as to add to the critical mass of demographic research on aging at CDS and Duke University. It is expected that after their five-year appointments, they will continue at Duke University on their own funded research programs and with regular faculty appointments in academic departments. It is also expected that they will enrich the aging research environment at CDS and Duke University by bringing knowledge from their prior area of scientific specialization in order to help expand the knowledge base at CDS on which future demographic aging projects can be based. Thus, it is expected that, by recruiting scientifically established researchers, with considerable research potential, that the scientific enrichment will indeed, be an intellectual two-way "street" for the K-12 fellows and CDS's research program.

Grant: 5K12AG000981-05
Program Director: SHRESTHA, LAURA B
Principal Investigator: WACHTER, KENNETH W. PHD
MATHEMATICS:STATISTICS
Title: CAREER AWARD PROGRAM IN DEMOGRAPHY OF AGING
Institution: UNIVERSITY OF CALIFORNIA BERKELEY BERKELEY, CA
Project Period: 1999/09/30-2004/08/30

The Principal Investigator and three co-investigators are all members of the Department of Demography at the University of California at Berkeley. They seek to increase the number of leading scientists in the demography of aging by hiring and mentoring researchers at early or middle formative stages in their careers. It is likely that one of the candidates will be an early post-doctoral scholar and that the other will be from among late junior faculty candidates; the Program as formulated here broadly proposes to mentor one of each. The proposal relies on four of Berkeley's major strengths in the field of population aging: 1. The four investigators have substantial experience in teaching, research, mentoring, and public service. The four investigators from that department have received substantial recognition, much of it for work in the demography of aging, including membership in the National Academy of Sciences (3), fellows of the American Academy of Arts and Sciences (2), the current winner of the Irene Taeuber Award from the Population Association of America, the Mindel Sheps Award (2), past chairs of the National Research Council Committee on Population (2) and membership on the current Council of the International Union for the Scientific Study of Population (1). 2. An interdisciplinary group of social science researchers with active research interests in the broad field of population aging. An NIA-funded Center on the Economics and Demography of Aging (CEDA) serves as the focal point for its member researchers, who come from such fields as business administration, demography, entomology, health economics, law, and public policy. 3. A wider group of researchers on aging in the biological sciences and in the professional schools of public health and social welfare, clustered around the Academic Geriatric Center on Aging. The in-coming Director of this Center is also Vice-Chair of CEDA and recipient of an NIA K-07 Academic Career Leadership Award to coordinate all aging-related activities in the Berkeley region. 4. The opportunity to work under mentors whose current research interests lie in one of four fields: biodemography of aging; analysis of intergenerational transfers; cross-national research on mortality at extreme ages; developing perspectives on aging grounded in evolutionary anthropology.

Grant: 5K12AG000983-05
Program Director: SHRESTHA, LAURA B
Principal Investigator: WISE, DAVID A PHD
Title: NBER CAREER AWARD PROGRAM IN THE DEMOGRAPHY OF AGING
Institution: NATIONAL BUREAU OF ECONOMIC RESEARCH CAMBRIDGE, MA
Project Period: 1999/09/30-2004/08/31

The NBER has become a leading research and training Center in aging, bringing together a large group of economics scholars at various points in their research careers to focus collectively on issues in aging. The proposed career award program in the demography of aging would build on this core program of research and training activity in aging. Indeed these highly successful ongoing activities would leverage the new program in the demography of aging to a level of excellence that we believe can create first-rate research scholars in demography, as well as providing a new foundation for NBER research on issues in the demography of aging. Building on our strengths, the NBER program would emphasize economic demography, focusing on issues that are at the juncture of demography and economics. The new commitment to demography is a natural direction of development for the ongoing NBER program, and represent an area of research in aging where the economics research community should be directing more attention. While most of the issues being addressed by the NBER research team in aging are at least broadly related to the changing age-structure of the population in the United States (and the world), only a subset of this research deals directly with demographic change and its implications. Our aim through this award is to facilitate the intellectual development of economics scholars toward issues in the demography of aging, and to expand our overall research agenda in the area of demography. Recipients of career development awards in demography would be selected from leading research universities around the country, and would come to the NBER for a year of intensive research on issues in the demography of aging.

Grant: 5P01AG018314-03
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: ALTER, GEORGE C. BA
Title: Early-life conditions, Social Mobility and Longevity
Institution: INDIANA UNIVERSITY BLOOMINGTON BLOOMINGTON, IN
Project Period: 2001/07/01-2004/06/30

DESCRIPTION (applicant's abstract): The population of the developed world is rapidly aging, and recent decreases in old-age mortality imply this process will continue, with enormous implications for public spending on health care, pensions etc. The aim of the proposed project is to improve understanding of determinants of individual health and mortality in old age and the demographic, epidemiological and socioeconomic factors governing the ageing process. More specifically, the project will assess the relative importance of early-life conditions, life course transitions, prevailing living conditions and public health interventions for later-life health and mortality. This knowledge is essential for improving forecasts of the future size and health of the elderly population in anticipation of future expenditures on pensions and medical care, and for designing public health interventions to promote health and reduce mortality at older ages. Studying the impact of early-life conditions on mortality in old age requires individual life histories covering long periods of time. This project brings together appropriate longitudinal data for four European countries in a comparative analysis of these issues.

Grant: 1P01AG022500-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: CAREY, JAMES R PHD
Title: The biodemography of life span
Institution: UNIVERSITY OF CALIFORNIA DAVIS DAVIS, CA
Project Period: 2003/09/15-2008/06/30

DESCRIPTION (provided by applicant): This program will bring experimental techniques, biological systems, demographic concepts, statistical methods, and theoretical models to bear on questions concerning the determinants of life span in both humans and in non-human model systems including both vertebrates (comparative demography of mammals; birds) and invertebrates (fruit flies; nematodes; honey bees). The five research projects that form the program are organized around the following crosscutting themes: (1) Life span is adaptive and shaped by nature; (2) Individuals age in the wild; (3) Sociality and life span are mutually affecting; and (4) Superarching principles provide all embracing order to variation in animal life spans. The program will generate new large-scale demographic databases for the honey bee, wild medflies, and *C. elegans* and life history data from the literature on several dozen vertebrate species, introduce new statistical models for analysis of demographic data on model species, develop a novel methodology for studying aging in the wild, develop more fully the mathematical foundations of biodemography, generate new models and theories concerned with the role of intergenerational transfer and sociality in the evolution of life span, explore questions concerned with the effects of stochastic environments on the evolution life span and hazard rates, and use comparative demography to identify general principles concerning life span evolution.

Grant: 5P01AG021079-02
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: HAUSER, ROBERT M
Title: Wisconsin Longitudinal Study: Tracking the Life Course
Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI
Project Period: 2002/09/15-2007/06/30

DESCRIPTION (provided by applicant): We propose a collaborative, multidisciplinary program of projects on aging and the life course that will both exploit and add to core resources of the Wisconsin Longitudinal Study (WLS). The program will use existing longitudinal data and new data, collected 45 years after the 1957 high school graduation of the original 10,317 participants. We are more than 50 investigators and colleagues at the University of Wisconsin and across the nation. We want to exploit the unique scientific value of the WLS, along with other relevant and comparable data on population aging, to pursue a broad agenda of research on social and economic factors in health and aging. We represent diverse scientific fields - sociology, demography, epidemiology, economics, social and cognitive psychology, industrial engineering, neuroscience, social work, psychiatry, nursing, and medicine. Our analytic work will reflect and, we hope, intermingle the full range of theories, models, and methods of our home disciplines. Regardless of individual and collective plans, all WLS data will be released to the research community as soon as they can be collected, cleaned, and documented. We will recruit, encourage, and support a cadre of researchers (and researchers-in-training) at the UW-Madison and elsewhere who will fully exploit the unique resources of the Wisconsin Longitudinal Study. We will supplement existing and new WLS data with linked data from individual administrative records, organizational records, and small area data. We will disseminate WLS data by several means including both public and secure access. We will sponsor and organize local and extramural seminars and workshops to encourage use of WLS data and to report research in progress, and we will organize a small project competition and workshops to encourage innovative uses (and new users) of WLS data. We will provide common resources and avenue for productive scientific interaction for an initial set of seven major analytic research projects that will use data from the WLS: Social and Behavioral Contexts of the Aging Mind; End-of-Life Planning and Well-Being in Late Life; Non-normative Parenting Impacts in Midlife and Old Age; Access to Care and Health Outcomes in the Near Elderly; Work, Health, and Well Being; Education in Careers, Health, and Retirement; and The Emotional Brain Across the Life Course.

Grant: 5P01AG017937-04
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MANTON, KENNETH G MA
Title: POPULATION MODELS OF FACTORS AFFECTING HEALTH TRENDS
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 2000/04/01-2005/03/31

This Program Project is designed to examine the recent changes in chronic disability and functioning in the U.S. elderly populations, possible sources of those changes including the introduction of the Medicare program and, more recent, biomedical research and therapeutic innovations and the future Medicare service use and cost implications of those changes and the processes underlying them. The work builds upon a significant body of research done at CDS on the analysis and forecasting of chronic disability and health changes in the U.S. elderly population. However, that model needs to be significantly expanded in scope of adding input from economists detailed analyses of Medicare expenditures, and a more in depth analysis of specific components of health changes (e.g., dementia, stroke). To perform these analysis we have assembled a multi-disciplinary team to carry out a well integrated set of analyses. To conduct those analyses one first defines three core functions. The first (A) is longitudinally linked files but also continuous linked Medicare records which will be kept current as the project is underway (i.e., we should have Medicare data from 1999 in hand with data for 2000 shortly available thereafter; later data will be available to 2001). The third core (C) will make general health forecasts. The four projects involve (1) methodological expansion of the health model to include data from multiple sources; (2) analysis of cohort different in health and Medicare service use; (3) analyses of the natural history of Medicare expenditures; (4) analyses of the recent changes in dementia and stroke and their health cost implications These projects are all designed to take advantage of the three cores and to be integrated so that their results will help resolve the basic questions.

Grant: 3P01AG017625-03S3
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MURRAY, CHRISTOPHER J.L. MD
Title: THE GLOBAL BURDEN OF DISEASE 2000 IN AGING POPULATIONS
Institution: HARVARD UNIVERSITY (SCH OF PUBLIC BOSTON, MA
HLTH)
Project Period: 2000/09/30-2005/08/31

The proposed program project on The Global Burden of Disease 2000 in Aging Populations is a coherent series of investigations that will strengthen the methodological and empirical basis for undertaking comparative assessments of health problems, their determinants and consequences in aging populations. Since the publication of the Global Burden of Disease Study 1990, there has been increasing interest in comparative analyses of health outcomes, determinants and consequences. The World Health Organization is committed to undertaking a major revision of the Global Burden of Disease Study for the year 2000. This program project would strengthen the scientific basis for this large-scale undertaking. It is structured around a core with an administrative, a data management and a methods component and eight projects: 1) measurement of adult mortality in the developing world; 2) non-communicable disease mortality transitions; 3) adapting statistical methods for public health research; 4) avoidable causes of adult chronic disease death; 5) self-reported and observed measures of health status; 6) the impact of co-morbidity on non-fatal health outcomes; 7) summary measures of population health; and 8) health costs of aging, present and future trends. The core and the eight projects enrich each other through multiple mechanisms, including investigators working on a number of components, common datasets and methods development. A key strength of the program is the close partnership between the lead institution and the World Health Organization, assuring the close coordination of the research work in the program through key personnel. The principal investigator is both a Professor at Harvard and the acting Director of the Global Programme on Evidence for Health Policy at the World Health Organization. WHO personnel are project leaders on three components. An important goal of this project is to aging population, while at the same time strengthening the empirical and methodological foundations on which policy decisions are made.

Grant: 5P01AG017625-04
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MURRAY, CHRISTOPHER J.L. MD
Title: THE GLOBAL BURDEN OF DISEASE 2000 IN AGING POPULATIONS
Institution: HARVARD UNIVERSITY (SCH OF PUBLIC BOSTON, MA
HLTH)
Project Period: 2000/09/30-2005/08/31

The proposed program project on The Global Burden of Disease 2000 in Aging Populations is a coherent series of investigations that will strengthen the methodological and empirical basis for undertaking comparative assessments of health problems, their determinants and consequences in aging populations. Since the publication of the Global Burden of Disease Study 1990, there has been increasing interest in comparative analyses of health outcomes, determinants and consequences. The World Health Organization is committed to undertaking a major revision of the Global Burden of Disease Study for the year 2000. This program project would strengthen the scientific basis for this large-scale undertaking. It is structured around a core with an administrative, a data management and a methods component and eight projects: 1) measurement of adult mortality in the developing world; 2) non-communicable disease mortality transitions; 3) adapting statistical methods for public health research; 4) avoidable causes of adult chronic disease death; 5) self-reported and observed measures of health status; 6) the impact of co-morbidity on non-fatal health outcomes; 7) summary measures of population health; and 8) health costs of aging, present and future trends. The core and the eight projects enrich each other through multiple mechanisms, including investigators working on a number of components, common datasets and methods development. A key strength of the program is the close partnership between the lead institution and the World Health Organization, assuring the close coordination of the research work in the program through key personnel. The principal investigator is both a Professor at Harvard and the acting Director of the Global Programme on Evidence for Health Policy at the World Health Organization. WHO personnel are project leaders on three components. An important goal of this project is to aging population, while at the same time strengthening the empirical and methodological foundations on which policy decisions are made.

Grant: 1P01AG023394-01
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: TUCKER, KATHERINE L PHD
Title: Center for Research/Nutrition & Health among the Elderly
Institution: TUFTS UNIVERSITY BOSTON BOSTON, MA
Project Period: 2003/09/30-2008/06/30

(Revised Abstract) DESCRIPTION: Puerto Rican older adults living in the U.S. mainland have been identified as a group highly at risk of excess chronic conditions, particularly diabetes, depression, and physical impairment. Few studies have been conducted on this rapidly growing and generally low-income ethnic group. To reduce health disparities, it is necessary to understand the factors that combine to progress to poor health outcomes. The overall aim of this Center is to perform a series of inter-related studies involving a cohort of older adults of Puerto Rican origin to evaluate specific stressors affecting the Puerto Rican community, and to determine the effect of these stressors on allostatic load and, in turn, on disease-specific outcomes. The Center will include four research projects. Project 1 is a prospective 2-year cohort study that will investigate both baseline and 2-year prospective associations between psychosocial stressors and allostatic load; and in turn, allostatic load and functional decline, specifically depression, cognitive decline and physical disability; along with the role of support, and vitamin intake and status in modifying these associations. Project 2 is a sociological investigation of psychosocial stressors and their measurement using both qualitative and quantitative methodology to gain contextual understanding of the sources of stress in this population that relate to allostatic load, and adapt instruments for its measurement. Project 3 consists of intervention studies. Using subsets of the baseline study, researchers will investigate the effectiveness of three different 2-year interventions in reducing indicators of allostatic load. Each is designed to be feasible for expansion by community agencies if effective. These include: 1) vitamin supplementation; 2) food coupons and nutrition education; and 3) social support and participation. Project 4 will investigate genetic contributions of allostatic load. Investigators will explore the relationship between selected gene variants and allostatic load at baseline and with change over time, and will investigate the interaction between gene variants and responses to the differing nutrition and social interventions. Three cores will work with all projects, including administrative, statistical, and laboratory cores. A pilot grants program during years 2 through 4 will encourage additional investigations relevant to the Center theme.

Grant: 5P01AG008761-14
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: VAUPEL, JAMES W MOTH OTHER AREAS
Title: OLDEST OLD MORTALITY--DEMOGRAPHIC MODELS AND ANALYSIS
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 1990/02/01-2003/12/31

DESCRIPTION (provided by applicant): Our current understanding of late mortality patterns may be limited by the experimental conditions under which they have been studied. This project is designed to expand our understanding about the process of senescence to species in its natural environment and to a possible new model system for aging using a plant species. This study, with *Plantago lanceolata*, is the largest demographic study of a species in its natural environment. The specific aims of this application include the following: to determine whether this species, shows age-dependent mortality, either in its natural environment or under controlled conditions; to quantify the genetic contribution to mortality patterns in a natural environment; and to use longitudinal data from a large number of individuals to link the lifecourse dynamics of individuals together with the population-level mortality patterns. The preliminary results from this study suggest that in a natural environment, mortality is very high and it shows seasonal and yearly variation. The analysis to date shows that, in the natural population, the largest individuals have the greatest reproductive output and the lowest mortality. The preliminary conclusion is that this species, that shows continued growth after reproductive maturity, may be able to escape the aging processes. Considerably more demographic analysis is required to verify this hypothesis. Additional analysis is planned to evaluate the importance of cohort history to the mortality dynamics, to link the longitudinal history of individuals with the mortality patterns, to determine if there is any evidence for a physiological decline associated with aging, and to determine how family and spatial location influence the mortality dynamics. One of the interesting results from this experiment is that under controlled conditions, individuals live significantly longer than they do in natural conditions, and the mortality patterns are very plastic. Future results will show whether this species shows age-dependent mortality at extremely late ages under these controlled conditions. This application requests 1.5 years of additional funding to support the continuation of the experiments and the analysis of the results.

Grant: 3P30AG012846-10S1
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: BOUND, JOHN PHD
Title: MICHIGAN CENTER ON THE DEMOGRAPHY OF AGING
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 1994/09/30-2004/06/30

This proposal requests funding for a P30 Center on the Demography of Aging at the University of Michigan. Building on Michigan's strengths in social science research, and aided by our existing NIA P20 exploratory aging center grant, the University of Michigan has become a leader in research on the demography and economics of aging. In the past five years we have added new junior and senior faculty specializing in aging research and have greatly expanded the portfolio of aging research among the existing faculty. As the home of major longitudinal surveys used for research on aging, along with numerous analytical projects using those surveys, and with the development of a large body of international aging research, research on aging has become a major focus of attention in core social science units on campus. We are confident that this proposed P30 center grant will lead to even greater advances in aging research at Michigan, and will allow us to assist in the developing of aging research nationally and internationally. Michigan's center will focus on the following scientific themes and approaches: health, work and retirement; interactions between health and economic status over time; health and economic status of diverse racial and ethnic populations; biodemography of aging; demography and economics of dementia; cohort analyses of current and future retirees; comparative international research; and the value of linked data and methods for ensuring confidentiality in research. In pursuing these themes, we are requesting support under Cores A-F, as defined in the RFA. Some of the major activities proposed include the following: Core A proposes an administrative and research support core build around the Director, Co-Director, Advisory Committee, administrative support staff, a computing specialist, and a data management specialist. Core B proposes new program development, including support for pilot projects and support for faculty development through both recruitment and the expansion of aging activity among existing faculty. Core C proposes innovative external networks including international networks focused on both developing countries and high-income countries. Core D proposes outreach and dissemination activities including web site development, on-line publication series, and workshops. Core E proposes an ambitious set of activities related to the analysis of restricted data, including the development of a statistical data enclave. Under Core F we propose a set of activities as Coordinating Center, including meetings and workshops for center administrators and technical staff and an integrated on-line bibliographic database.

Grant: 3P30AG017265-05S1

Program Director: PATMIOS, GEORGEANNE

Principal Investigator: CRIMMINS, EILEEN M. PHD SOCIOLOGY:HUMAN
ECOLOGY/DEMOGRAPHY

Title: USC/UCLA CENTER ON BIODEMOGRAPHY AND POPULATION HEALTH

Institution: UNIVERSITY OF SOUTHERN CALIFORNIA LOS ANGELES, CA

Project Period: 1999/08/15-2004/06/30

(Adapted from the application) The proposed USC/UCLA Center on Biodemography and Population Health (BPH) will be located at the Andrus Gerontology Center of the University of Southern California (USC) and the Multicampus Program in Geriatric Medicine and Gerontology in the School of Medicine of the University of California at Los Angeles (UCLA). This proposal seeks funding in order to take advantage of the unique interdisciplinary collaboration that has developed between demographers and biologists at USC and epidemiologists and clinical geriatricians at UCLA by uniting them in a Center devoted to understanding population health. The primary purpose of BPH is to provide a synergistic research environment for the integration and translation of research findings from a variety of disciplines such as epidemiology, clinical geriatrics, biostatistics, and biology into their effects on the health sums of populations and the expected life cycles of individuals. The integration of biological, epidemiologic and medical risk information is fundamental to understanding and projecting demographic trends and differences in population health. In addition, the application of the demographic perspective to medical, epidemiological, and biological knowledge is central to evaluating the relative importance of the various determinants of population health. The specific aims of the USC/UCLA Center on BPH are: (1) to support pilot projects and on-going bio-demographic research that integrate epidemiological, medical, and biological information with the demographic perspective on population health; (2) to develop models of population health outcomes that will clarify the effects of changes in risk factors and interventions on population health; (3) to assemble a team of investigators that joins demographers with researchers from other disciplines to focus on demographic models of population health; (4) to disseminate results of Center work to, and integrate work from, a network of related researchers and policy makers. The research supported by this center will lead to a better understanding of: (1) the effects of social, behavioral, biological, and medical factors on population health outcomes; (2) the interdependence of health outcomes including chronic diseases, functioning changes, disability and morality; (3) potential changes in the rates of disease and functioning problems in the aging population in the future; (4) the causes of observed racial, socioeconomic, and gender differences in population health at the older ages.

Grant: 5P30AG017265-05
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: CRIMMINS, EILEEN M. PHD
Title: USC/UCLA CENTER ON BIODEMOGRAPHY AND POPULATION HEALTH
Institution: UNIVERSITY OF SOUTHERN CALIFORNIA LOS ANGELES, CA
Project Period: 1999/08/15-2004/06/30

(Adapted from the application) The proposed USC/UCLA Center on Biodemography and Population Health (BPH) will be located at the Andrus Gerontology Center of the University of Southern California (USC) and the Multicampus Program in Geriatric Medicine and Gerontology in the School of Medicine of the University of California at Los Angeles (UCLA). This proposal seeks funding in order to take advantage of the unique interdisciplinary collaboration that has developed between demographers and biologists at USC and epidemiologists and clinical geriatricians at UCLA by uniting them in a Center devoted to understanding population health. The primary purpose of BPH is to provide a synergistic research environment for the integration and translation of research findings from a variety of disciplines such as epidemiology, clinical geriatrics, biostatistics, and biology into their effects on the health status of populations and the expected life cycles of individuals. The integration of biological, epidemiologic and medical risk information is fundamental to understanding and projecting demographic trends and differences in population health. In addition, the application of the demographic perspective to medical, epidemiological, and biological knowledge is central to evaluating the relative importance of the various determinants of population health. The specific aims of the USC/UCLA Center on BPH are: (1) to support pilot projects and on-going bio-demographic research that integrate epidemiological, medical, and biological information with the demographic perspective on population health; (2) to develop models of population health outcomes that will clarify the effects of changes in risk factors and interventions on population health; (3) to assemble a team of investigators that joins demographers with researchers from other disciplines to focus on demographic models of population health; (4) to disseminate results of Center work to, and integrate work from, a network of related researchers and policy makers. The research supported by this center will lead to a better understanding of: (1) the effects of social, behavioral, biological, and medical factors on population health outcomes; (2) the interdependence of health outcomes including chronic diseases, functioning changes, disability and mortality; (3) potential changes in the rates of disease and functioning problems in the aging population in the future; (4) the causes of observed racial, socioeconomic, and gender differences in population health at the older ages.

Grant: 5P30AG004590-19
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: GUTMANN, MYRON P. PHD HISTORY
Title: FACTORS IN AGING: DEVELOPMENT RESEARCH RESOURCES
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 1984/02/01-2007/08/31

DESCRIPTION (provided by applicant): The mission of the National Archive of Computerized Data on Aging (NACDA) is to create a data infrastructure to stimulate gerontological research and advance gerontological knowledge. Through the development and delivery of research resources and data services, NACDA alerts researchers to opportunities for secondary data analysis, provides tools to locate and access relevant materials, and enhances the available gerontological database. NACDA also offers state-of-the-art training on theoretical issues and analytic techniques related to secondary data analysis. By promoting and facilitating the use of extant resources for research and teaching, NACDA plays a vital role in the replication of previous results and the discovery of new findings. NACDA is responsible for archiving, upgrading, and disseminating the most comprehensive collection of electronic data and documentation in the gerontological sciences. Because of the explosive growth in gerontological data collections, there is an ongoing need for an organization that systematically locates, catalogs, provides, and preserves data in such a way that researchers can find and use them efficiently. There is also a need for an organization that helps the field deal with its information overload. NACDA has consistently filled a unique niche in the social sciences for the past quarter century and remains uniquely qualified to fulfill the role as the primary distributor of secondary data on aging in the United States.

Grant: 3P30AG004590-19S1
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: GUTMANN, MYRON P. PHD HISTORY
Title: FACTORS IN AGING: DEVELOPMENT RESEARCH RESOURCES
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 1984/02/01-2007/08/31

DESCRIPTION (provided by applicant): The mission of the National Archive of Computerized Data on Aging (NACDA) is to create a data infrastructure to stimulate gerontological research and advance gerontological knowledge. Through the development and delivery of research resources and data services, NACDA alerts researchers to opportunities for secondary data analysis, provides tools to locate and access relevant materials, and enhances the available gerontological database. NACDA also offers state-of-the-art training on theoretical issues and analytic techniques related to secondary data analysis. By promoting and facilitating the use of extant resources for research and teaching, NACDA plays a vital role in the replication of previous results and the discovery of new findings. NACDA is responsible for archiving, upgrading, and disseminating the most comprehensive collection of electronic data and documentation in the gerontological sciences. Because of the explosive growth in gerontological data collections, there is an ongoing need for an organization that systematically locates, catalogs, provides, and preserves data in such a way that researchers can find and use them efficiently. There is also a need for an organization that helps the field deal with its information overload. NACDA has consistently filled a unique niche in the social sciences for the past quarter century and remains uniquely qualified to fulfill the role as the primary distributor of secondary data on aging in the United States.

Grant: 5P30AG017266-05
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: HAUSER, ROBERT M
Title: CENTER FOR DEMOGRAPHY OF HEALTH AND AGING
Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI
Project Period: 1999/08/15-2004/06/30

The Center for Demography of Health and Aging (CDHA) at the University of Wisconsin-Madison will complement the Center for Demography and Ecology (CDE), one of the NICHD-supported P-30 centers for demographic research. CDHA will both share and build on the substantial research infrastructure of CDE. It will create new links between social demography and biomedical and epidemiological research on aging. The overall goal of the CDHA will be to build a major research and training program in the demography of health and aging. Major themes of ongoing and developmental research activities within CDHA include (a) midlife development and aging; (b) economics of population aging; (c) inequalities in health and aging; and (d) international, comparative studies of population aging. These cross-cutting themes build on current activities of members of CDHA. The administrative and research support core will provide leadership and administrative support for the Center. The program development core will provide modest support for new faculty development and for faculty, staff, and research assistants engaged in innovative pilot research projects that are likely to lead to major NIA support. The external innovative network core will build provide a networked current awareness service for research in the demography of aging and support regular workshops, conferences, and visits. The external research resources support and dissemination core will support user-friendly provision of large-scale public data resources in the demography of health and aging. The statistical data enclave core will develop a facility for the analysis of sensitive data under secure conditions. Such data might include proprietary materials, confidential medical or financial records, or potentially identifiable individual records. The Center will also develop expertise in new statistical and computational tools for research in the demography of aging.

Grant: 3P30AG017266-05S1
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: HAUSER, ROBERT M MA SOCIOLOGY
Title: CENTER FOR DEMOGRAPHY OF HEALTH AND AGING
Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI
Project Period: 1999/08/15-2004/06/30

The Center for Demography of Health and Aging (CDHA) at the University of Wisconsin-Madison will complement the Center for Demography and Ecology (CDE), one of the NICHD-supported P-30 centers for demographic research. CDHA will both share and build on the substantial research infrastructure of CDE. It will create new links between social demography and biomedical and epidemiological research on aging. The overall goal of the CDHA will be to build a major research and training program in the demography of health and aging. Major themes of ongoing and developmental research activities within CDHA include (a) midlife development and aging; (b) economics of population aging; (c) inequalities in health and aging; and (d) international, comparative studies of population aging. These cross-cutting themes build on current activities of members of CDHA. The administrative and research support core will provide leadership and administrative support for the Center. The program development core will provide modest support for new faculty development and for faculty, staff, and research assistants engaged in innovative pilot research projects that are likely to lead to major NIA support. The external innovative network core will build provide a networked current awareness service for research in the demography of aging and support regular workshops, conferences, and visits. The external research resources support and dissemination core will support user-friendly provision of large-scale public data resources in the demography of health and aging. The statistical data enclave core will develop a facility for the analysis of sensitive data under secure conditions. Such data might include proprietary materials, confidential medical or financial records, or potentially identifiable individual records. The Center will also develop expertise in new statistical and computational tools for research in the demography of aging.

Grant: 5P30AG012815-10
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: HURD, MICHAEL D PHD
Title: RAND CENTER FOR THE STUDY OF AGING
Institution: RAND CORPORATION SANTA MONICA, CA
Project Period: 1994/09/30-2004/06/30

RAND proposes to continue and expand its Center for the Study of Aging, until now an NIA-funded P20 exploratory center, for another five years. We propose sustaining the Center as an NIA-funded research and development center (P30), including cores for administrative and research support (A), program development (B), external innovative network development (C), and external research resources support and dissemination (D). The new Center will support research on the health and economic status of aging. This research is currently carried out by two P01 program projects, elements of a third P01 and a P50, and roughly 20 separately funded individual projects. While these studies will make important individual contributions to the state of knowledge in this area, the P30 will greatly increase their coordination, integration, productivity, and impact in the following ways: providing for the unified development of data and computing services needed by multiple projects; facilitating communication and cooperation across research projects; developing research ideas with high potential but some risk into proposals for R01s and R03s; more fully integrating new junior researchers into the mainstream of going research at RAND; facilitating the recruitment and integration of mid-level researchers into aging research at use; disseminating and promoting the use of three extraordinary sets of panel data on families, wealth, and health in and outside RAND who are interested in aging; familiarizing social scientists with the latest biomedical research on aging; and adapting research findings from single or multiple projects into research briefs accessible and of interest to the broad policy community. The new Center will continue taking advantage of the RAND institutional environment including the many infrastructural resources relating to commuting, analysis, and dissemination and the organization's willingness to contribute funds toward research during transitional periods. The coherence of the Center's activities and of the research it supports will be enhanced through two means: centralizing the direction of all cores and the Center itself in one individual and establishing an oversight committee including the PI, the director of the program in which the P30 will be housed, and the leader of several of the supported projects.

Grant: 3P30AG012815-10S1
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: HURD, MICHAEL D PHD
Title: RAND CENTER FOR THE STUDY OF AGING
Institution: RAND CORPORATION SANTA MONICA, CA
Project Period: 1994/09/30-2004/06/30

RAND proposes to continue and expand its Center for the Study of Aging, until now an NIA-funded P20 exploratory center, for another five years. We propose sustaining the Center as an NIA-funded research and development center (P30), including cores for administrative and research support (A), program development (B), external innovative network development (C), and external research resources support and dissemination (D). The new Center will support research on the health and economic status of aging. This research is currently carried out by two P01 program projects, elements of a third P01 and a P50, and roughly 20 separately funded individual projects. While these studies will make important individual contributions to the state of knowledge in this area, the P30 will greatly increase their coordination, integration, productivity, and impact in the following ways: providing for the unified development of data and computing services needed by multiple projects; facilitating communication and cooperation across research projects; developing research ideas with high potential but some risk into proposals for R01s and R03s; more fully integrating new junior researchers into the mainstream of going research at RAND; facilitating the recruitment and integration of mid-level researchers into aging research at use; disseminating and promoting the use of three extraordinary sets of panel data on families, wealth, and health in and outside RAND who are interested in aging; familiarizing social scientists with the latest biomedical research on aging; and adapting research findings from single or multiple projects into research briefs accessible and of interest to the broad policy community. The new Center will continue taking advantage of the RAND institutional environment including the many infrastructural resources relating to commuting, analysis, and dissemination and the organization's willingness to contribute funds toward research during transitional periods. The coherence of the Center's activities and of the research it supports will be enhanced through two means: centralizing the direction of all cores and the Center itself in one individual and establishing an oversight committee including the PI, the director of the program in which the P30 will be housed, and the leader of several of the supported projects.

Grant: 5P30AG012846-10
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: LAM, DAVID A MA
Title: MICHIGAN CENTER ON THE DEMOGRAPHY OF AGING
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 1994/09/30-2004/06/30

This proposal requests funding for a P30 Center on the Demography of Aging at the University of Michigan. Building on Michigan's strengths in social science research, and aided by our existing NIA P20 exploratory aging center grant, the University of Michigan has become a leader in research on the demography and economics of aging. In the past five years we have added new junior and senior faculty specializing in aging research and have greatly expanded the portfolio of aging research among the existing faculty. As the home of major longitudinal surveys used for research on aging, along with numerous analytical projects using those surveys, and with the development of a large body of international aging research, research on aging has become a major focus of attention in core social science units on campus. We are confident that this proposed P30 center grant will lead to even greater advances in aging research at Michigan, and will allow us to assist in the developing of aging research nationally and internationally. Michigan's center will focus on the following scientific themes and approaches: health, work and retirement; interactions between health and economic status over time; health and economic status of diverse racial and ethnic populations; biodemography of aging; demography and economics of dementia; cohort analyses of current and future retirees; comparative international research; and the value of linked data and methods for ensuring confidentiality in research. In pursuing these themes, we are requesting support under Cores A-F, as defined in the RFA. Some of the major activities proposed include the following: Core A proposes an administrative and research support core build around the Director, Co-Director, Advisory Committee, administrative support staff, a computing specialist, and a data management specialist. Core B proposes new program development, including support for pilot projects and support for faculty development through both recruitment and the expansion of aging activity among existing faculty. Core C proposes innovative external networks including international networks focused on both developing countries and high-income countries. Core D proposes outreach and dissemination activities including web site development, on-line publication series, and workshops. Core E proposes an ambitious set of activities related to the analysis of restricted data, including the development of a statistical data enclave. Under Core F we propose a set of activities as Coordinating Center, including meetings and workshops for center administrators and technical staff and an integrated on-line bibliographic database.

Grant: 3P30AG012839-10S1
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: LEE, RONALD D PHD SOC SC/REL
DI:ECONOMICS, OTHER
Title: CENTER ON THE ECONOMICS AND DEMOGRAPHY OF AGING
Institution: UNIVERSITY OF CALIFORNIA BERKELEY BERKELEY, CA
Project Period: 1994/09/30-2004/06/30

Berkeley is a leading center for demographic and economic research and training and is specially recognized for work in aging. Since 1994, NIA has funded a P20 Center on the Economics and Demography of Aging, CEDA, which has greatly enhanced research and training in aging at Berkeley. This proposal seeks another five years of support at a substantially higher level. There are 23 highly interdisciplinary CEDA members, including three members of the National Academy of Sciences, three members of the National Academy of Sciences, three Sheps Award recipients, two John Bates Clark Medical recipients, and two winners of the Kenneth Arrow Award in Health Economics. Members hold 21 NIA research grants, 12 additional federal aging grants, and a total of 37 research grants in aging. Research themes include 1) demographic forecasting; 2) fiscal economic demography; 3) mortality; 4) health and health care; 5) economic demography of the life cycle; 6) biodemography. Core B will fund pilot projects and support junior researcher development; Core C will fund two conferences a year. Part I of Core A will solicit and evaluate proposals for Cores B and C and organize the resulting activities; arrange for visiting consultants, seminars, seminar speakers; write reports; and generally provide administrative support and oversight for CEDA. Part 2 of Core A will provide computing programming, and data-related services for members, pilot projects, and graduate students, and assist in other ways with research.

Grant: 5P30AG012839-10
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: LEE, RONALD D. PHD SOC SC/REL
DI:ECONOMICS, OTHER
Title: CENTER ON THE ECONOMICS AND DEMOGRAPHY OF AGING
Institution: UNIVERSITY OF CALIFORNIA BERKELEY BERKELEY, CA
Project Period: 1994/09/30-2004/06/30

Berkeley is a leading center for demographic and economic research and training and is specially recognized for work in aging. Since 1994, NIA has funded a P20 Center on the Economics and Demography of Aging, CEDA, which has greatly enhanced research and training in aging at Berkeley. This proposal seeks another five years of support at a substantially higher level. There are 23 highly interdisciplinary CEDA members, including three members of the National Academy of Sciences, three members of the National Academy of Sciences, three Sheps Award recipients, two John Bates Clark Medical recipients, and two winners of the Kenneth Arrow Award in Health Economics. Members hold 21 NIA research grants, 12 additional federal aging grants, and a total of 37 research grants in aging. Research themes include 1) demographic forecasting; 2) fiscal economic demography; 3) mortality; 4) health and health care; 5) economic demography of the life cycle; 6) biodemography. Core B will fund pilot projects and support junior researcher development; Core C will fund two conferences a year. Part I of Core A will solicit and evaluate proposals for Cores B and C and organize the resulting activities; arrange for visiting consultants, seminars, seminar speakers; write reports; and generally provide administrative support and oversight for CEDA. Part 2 of Core A will provide computing programming, and data-related services for members, pilot projects, and graduate students, and assist in other ways with research.

Grant: 5P30AG012852-10
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MANTON, KENNETH G MA
Title: CENTER FOR LONGITUDINAL ANALYSIS IN MEDICAL DEMOGRAPHY
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 1994/09/30-2004/06/30

The overall goal of this NIA P30 Research and Development Center grant is to provide administrative infrastructure, pilot project support, faculty development resources, resources for research networking, external research support resources, and statistical development for the Center for Demographic Studies research program on aging and its associated pre- and post-doctoral training programs. This support is not only to maintain the activities of the larger portfolio of NIA grants and contracts currently ongoing at the Center for Demographic Studies but also to define direction as to new areas of science to CDS investigators. For example, the prior P20 grant helped us develop components of the 1999 NLTCS which assessed genetic determinants of disease and aging. This function (or program development and evolution) will be promoted by Core A advisory groups, Core B pilot projects, Core C scientific collaborator networks, and the Core E statistical development group. Core D will help extend those innovations to other NIA investigators not at Duke or formally in one of its networking systems. Thus, the P30 Center project will both support current research and help plan future research directions and make the results of those activities more broadly available. Such program development would not be possible without the specialized infrastructure offered by the P30 Center. The areas promoted in the P30 Center include biodemography, medical demography, studies of the oldest-old population, genetics of aging and chronic diseases, long-term care, and caregiver services, cost of illness, health and functional status forecasting, studies of women's health among others (see Introduction).

Grant: 5P30AG017248-04
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MENKEN, JANE A PHD OTHER AREAS
Title: POPULATION AGING CENTER
Institution: UNIVERSITY OF COLORADO AT BOULDER BOULDER, CO
Project Period: 2000/09/25-2004/06/30

(Adapted from the application) This application is a request to establish a P30 Center on the demography and economics of health and aging at the University of Colorado (UC) at Boulder. The aims of the proposed Population Aging Center are: (1) to advance understanding of the social and biological influences on health and aging in disadvantaged populations, both nationally and internationally; (2) to advance understanding of the social and economic position of the aging in light of differential migration and spatial redistribution; and (3) to create an effective infrastructure to achieve the foregoing aims through the establishment Population Aging Center that would foster interdisciplinary collaborative research. The Center will attract CU scholars previously unaffiliated with the PPP; some are already working in the demography and economics of aging and others are doing related work that can illuminate aging and health, especially from biological and genetic perspectives. It will seek out young investigators new to the field who can be attracted by its challenge. The existence of the proposed Center would also facilitate the establishment and extension of linkages with researchers at other institutions, within and outside the U.S. The two research themes for the proposed Center are: (1) aging and health of disadvantaged populations, both within and outside the U.S.; and, (2) migration and distribution and how they affect the social and economic position of the aging. These themes will be pursued simultaneously among disadvantaged populations in the U.S. and elsewhere in the developed and developing world. The new Center will provide an interdisciplinary context for inquiry that is informed simultaneously by biological, social, and economic perspectives. While existing lines of research will continue, the Center will encourage fresh approaches to the problems of aging that are informed by an expanded, interdisciplinary framework. The Center will have an Administrative and Research Support Core that would promote research opportunities and, interdisciplinary collaborations. It will provide both grant management and other administrative services. computer network servers and desktop computer maintenance and support, appropriate software, data management, and statistical consulting. The Center will also have a Program Development Core that will support new investigators and offer seed money for pilot projects or small conferences or workshops based on internal competitions. These pilot studies will be expected to lead to full research projects. The Center will have Associates from CU and other institutions in the U.S. and other countries.

Grant: 3P30AG017248-04S1
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MENKEN, JANE A PHD OTHER AREAS
Title: POPULATION AGING CENTER
Institution: UNIVERSITY OF COLORADO AT BOULDER BOULDER, CO
Project Period: 2000/09/25-2004/06/30

(Adapted from the application) This application is a request to establish a P30 Center on the demography and economics of health and aging at the University of Colorado (UC) at Boulder. The aims of the proposed Population Aging Center are: (1) to advance understanding of the social and biological influences on health and aging in disadvantaged populations, both nationally and internationally; (2) to advance understanding of the social and economic position of the aging in light of differential migration and spatial redistribution; and (3) to create an effective infrastructure to achieve the foregoing aims through the establishment Population Aging Center that would foster interdisciplinary collaborative research. The Center will attract CU scholars previously unaffiliated with the PPP; some are already working in the demography and economics of aging and others are doing related work that can illuminate aging and health, especially from biological and genetic perspectives. It will seek out young investigators new to the field who can be attracted by its challenge. The existence of the proposed Center would also facilitate the establishment and extension of linkages with researchers at other institutions, within and outside the U.S. The two research themes for the proposed Center are: (1) aging and health of disadvantaged populations, both within and outside the U.S.; and, (2) migration and distribution and how they affect the social and economic position of the aging. These themes will be pursued simultaneously among disadvantaged populations in the U.S. and elsewhere in the developed and developing world. The new Center will provide an interdisciplinary context for inquiry that is informed simultaneously by biological, social, and economic perspectives. While existing lines of research will continue, the Center will encourage fresh approaches to the problems of aging that are informed by an expanded, interdisciplinary framework. The Center will have an Administrative and Research Support Core that would promote research opportunities and, interdisciplinary collaborations. It will provide both grant management and other administrative services. computer network servers and desktop computer maintenance and support, appropriate software, data management, and statistical consulting. The Center will also have a Program Development Core that will support new investigators and offer seed money for pilot projects or small conferences or workshops based on internal competitions. These pilot studies will be expected to lead to full research projects. The Center will have Associates from CU and other institutions in the U.S. and other countries.

Grant:	3P30AG012836-10S1	
Program Director:	PATMIOS, GEORGEANNE	
Principal Investigator:	SOLDO, BETH J	PHD
		SOCIOLOGY:SOCIOLOGY-UNSPECIFIED
Title:	CENTER ON THE DEMOGRAPHY OF AGING	
Institution:	UNIVERSITY OF PENNSYLVANIA	PHILADELPHIA, PA
Project Period:	1994/09/30-2004/06/30	

(Adapted from the application) The Population Aging Research Center (PARC) in the Population Studies Center (PSC) at University of Pennsylvania (UP) is well-positioned to solidify and expand its program in the demography and economics of health and aging by building on its substantial and rapidly growing strengths in these areas. The PSC has devoted increasing attention to issues related to the demography and economics of health and aging. The research on aging has coalesced into a strong and expanding program. The number of PARC Research Associates engaged in research on aging has increased substantially during the period of P20 support and will continue to increase during the P30 period. The specific aims of PARC for 1999-2004 are to: (1) Provide general support to strengthen research on the PARC scientific themes: (a) Mortality and Health at Old Ages, (b) Economics of Pensions, Retirement, Work and Health, and (c) Aging in Families and Households and Intergenerational Relations, with the cross-cutting theme of the Diversity of Aging. (2) Provide support for the PARC Administrative and Research Support Core to (a) support PARC planning, coordination, review and management and (b) provide shared support services to facilitate research on aging. (3) Provide support for expanding the Program Development Core activities, including (a) increased exploratory, pilot projects, selected by a competitive review and (b) intensified new faculty development in aging topics. (4) Strengthen the External Innovative Network Core through (a) Inter-University Workshops on New Research Areas and (b) involving demographic researchers in the symposia organized by the Pension Research Council. (5) Strengthen the External Research Resources Support and Dissemination Core that will (a) electronically disseminate PARC Working Papers and information about new data sets and methodologies developed at PARC and (b) develop and distribute periodic Penn-PARC Policy Bulletins with synthesis of PARC research results targeted at the scientific and policy-making communities. (6) Develop a Statistical Data Enclave Core to support analysis of large-scale, often- longitudinal, databases with linked administrative data, geocoding, and, potentially, genetic data with safeguards for data security/confidentiality.

Grant: 3P30AG012857-10S1
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: WAITE, LINDA J PHD SOCIOLOGY
Title: CENTER ON DEMOGRAPHY AND ECONOMICS OF AGING (COA)
Institution: NATIONAL OPINION RESEARCH CENTER CHICAGO, IL
Project Period: 1994/09/30-2004/06/30

(Adapted from the application) This P30 center grant proposal requests funding for a five-year period for the Center on the Demography and Economics of Aging, directed by Dr. Linda Waite, at NORC and UC. The Chicago Center on Aging, now in its fifth year of funding from NIA, provides support to the 23 funded and 13 pending research projects in four key areas: (1) economics of aging; (2) health policy; (3) demography of aging; and (4) biodemography. This investigative team seeks continued funding for four core units, including an Administrative and Research Support Core, a Program Development Core, an External Innovative Network Core, and a Secure Data Enclave Core. These four cores together facilitate and support a large and extremely active program of research and training at the UC. The Administrative Core, directed by Dr. Linda Waite, consists of six service functions: (1) proposal preparation, (2) the Demography Workshop (3) desktop support services, (4) the Data Archive, (5) statistical consulting, and (6) dissemination services. The Program Development Core, directed by Dr. Brigitte Madrian, consists of: (1) an active program of small-scale pilot projects; (2) a visiting scholars program; and, (3) support for new faculty development in aging. The External Innovative Network Core, directed by Dr. Jay Olshansky, seeks to develop an innovative international network to facilitate collaborative research ties and development of data resources between the U.S. and the U.K. The two U.K. nodes on this will be directed by Dr. Astrid Fletcher at the London School of Hygiene and Tropical Medicine and Dr. Sarah Harper at the Oxford Centre on Population Aging. The Statistical Data Enclave Core, directed by Dr. Ross M. Stolzenberg, provides Core A researchers, research assistants pre- and post-doctoral students and Data Archive staff with a secure facility for analysis of confidential data.

Grant: 5P30AG012857-10
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: WAITE, LINDA J. BA
Title: CENTER ON DEMOGRAPHY AND ECONOMICS OF AGING (COA)
Institution: NATIONAL OPINION RESEARCH CENTER CHICAGO, IL
Project Period: 1994/09/30-2004/06/30

(Adapted from the application) This P30 center grant proposal requests funding for a five-year period for the Center on the Demography and Economics of Aging, directed by Dr. Linda Waite, at NORC and UC. The Chicago Center on Aging, now in its fifth year of funding from NIA, provides support to the 23 funded and 13 pending research projects in four key areas: (1) economics of aging; (2) health policy; (3) demography of aging; and (4) biodemography. This investigative team seeks continued funding for four core units, including an Administrative and Research Support Core, a Program Development Core, an External Innovative Network Core, and a Secure Data Enclave Core. These four cores together facilitate and support a large and extremely active program of research and training at the UC. The Administrative Core, directed by Dr. Linda Waite, consists of six service functions: (1) proposal preparation, (2) the Demography Workshop (3) desktop support services, (4) the Data Archive, (5) statistical consulting, and (6) dissemination services. The Program Development Core, directed by Dr. Brigitte Madrian, consists of: (1) an active program of small-scale pilot projects; (2) a visiting scholars program; and, (3) support for new faculty development in aging. The External Innovative Network Core, directed by Dr. Jay Olshansky, seeks to develop an innovative international network to facilitate collaborative research ties and development of data resources between the U.S. and the U.K. The two U.K. nodes on this will be directed by Dr. Astrid Fletcher at the London School of Hygiene and Tropical Medicine and Dr. Sarah Harper at the Oxford Centre on Population Aging. The Statistical Data Enclave Core, directed by Dr. Ross M. Stolzenberg, provides Core A researchers, research assistants pre- and post-doctoral students and Data Archive staff with a secure facility for analysis of confidential data.

Grant: 1R01AG020673-01A1
Program Director: SHRESTHA, LAURA B
Principal Investigator: ALWIN, DUANE PHD
Title: Aging and the Reliability of Survey Data
Institution: PENNSYLVANIA STATE UNIVERSITY-UNIV UNIVERSITY PARK, PA
PARK
Project Period: 2003/02/15-2006/01/31

DESCRIPTION (provided by applicant): This research investigates the relationship of age to measurement errors in survey-administered self-report questionnaires. The focus of the research is on the survey interview as a method of gathering social data, and the extent to which measurement errors assessed in such interviews vary as a function of the respondent's age. The overall aims of this project are to better understand the nature of survey measurement errors and the processes by which they are generated, and to make practical recommendations about the characteristics of survey questions that will improve the quality of data in surveys of the aging population. To accomplish these goals the research conducts a systematic analysis of the reliability of responses to survey questions using several nationally representative panel data sets. First, we build upon our prior NSF-supported research using three surveys from the National Election Study (NES) series -- the 1956-58-60, 1972-74-76, and 1992-94-96 panel studies of the American electorate, and a fourth panel survey, the 1986-89-94 Americans' Changing Lives (ACL) study of health and well-being, to examine reliability by age, controlling for education. Second, we investigate these issues using two innovative panel surveys of middle-aged and older adults: the original Health & Retirement Study (HRS) panel study of preretirement men and women aged 51-61 assessed in 1992 (n=9,824), and reinterviewed in 1994, 1996, 1998 and 2000, and the parallel study of Asset and Health Dynamics (AHEAD) which interviewed adults aged 70 and above in 1993, and reinterviewed them in 1995, 1998 and 2000 (n=7,447). The younger HRS (birth cohorts of 1931-41) and older AHEAD (birth cohorts of 1923 and before) respondents were asked many of the same questions, permitting the comparison of measurement errors across groups. Age-specific levels of reliability will be estimated for approximately 1,000 survey questions using a variety of state-of-the-art estimation strategies. Two basic approaches will be employed in the estimation of reliability- first the SEM-based maximum-likelihood approach for situations where it makes sense to assume continuous unobserved latent variables, and second the "latent transition" models that are appropriate where the unobserved latent variables are latent classes. Within the SEM approach the research will employ several different estimation strategies depending on the scale assumptions appropriate to the observed data, including standard Pearson-based covariance approaches for continuous variables, tetrachoric correlations for dichotomous variables and polychoric-based asymptotic covariance approach with weighted least squares estimation for ordinal variables. A major focus of the analysis is on age-related differences in the impact of the formal properties of survey questions (e.g., question content, length of question text, number and complexity of response options, and the provision of explicit "Don't Know" response options) on reliability. Assembling information on reliability from these data sources can help improve knowledge about the strengths and weaknesses of survey data. It is expected that the results of this research will be relevant to the general task of uncovering the sources of age-related measurement errors in surveys and the improvement of methods of survey data collection across the life span through the application of this knowledge.

DESCRIPTION (Adapted from the Applicant's Abstract): This is a proposal for an addition to the longitudinal data from the National Survey of Families and Households. NSFH occupies a unique niche defined by the great depth of data on family interactions (up, down, and across the generational ladder) in the context of a holistic approach that includes measurement across a wide range of substantive domains. It is a companion proposal to a revision that is under review by NICHD, which is limited to the re-interview of parent-child dyads. Those data will frustrate researchers who want to address other topics on aging, both because of the selective nature of this population for other purposes and because virtually all of the parents will be under age 60. The current proposal to NIA would remedy that situation by complementing the NICHD proposal and making possible central aging analyses that would otherwise be precluded by the restriction to the parent-child sample. Under this proposal to NIA, approximately 10,907 subjects would be surveyed, including 6072 main respondents, 2948 original spouse/partners, 1072 new spouse/partners at NSFH-2, and 815 new spouse/partners at NSFH-3. This NIA addition to the sample will range in age from the thirties to the nineties. Previous NSFH data collection has accumulated considerable information about the respondent's parents and their childhood (including childhood socioeconomic status). Complete life event history information is available for respondent's living arrangements in childhood, cohabitation, marriage and union stability, fertility, and employment. Proximity, contact, caregiving, relationship quality, co-residence, and the exchange of financial, instrumental, and emotional support with adult children and parents (and parents-in-law) has been tracked. Relationship quality with spouse, contact and support (including caregiving) exchange with siblings, other relatives, and friends has been assessed. Information on social integration in community and religious activities as well as about a wide range of social psychological attitudes, including attitudes about intergenerational obligations and orientations toward retirement is available. Detailed information about income, wealth, physical health, and psychological well being was included at both prior waves of the survey. The new wave will extend these observations for another 8 years, more than doubling the number of transitions observed between the first two waves.

Grant: 1R01AG022488-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: CAGNEY, KATHLEEN A PHD
Title: Neighborhood Context and the Health of Older Adults
Institution: UNIVERSITY OF CHICAGO CHICAGO, IL
Project Period: 2003/09/30-2007/08/31

DESCRIPTION (provided by applicant): The capacity of communities to bolster and sustain the well being of individual residents is particularly salient for older adults; their daily activities are likely dependent on the infrastructure and social resources of their communities, particularly if health is already compromised. Although it has long been believed that the neighborhood one lives in affects one's health, it has been difficult to delineate why, and under what circumstances, neighborhood context contributes to health. We bring an important new sociological concept, collective efficacy, to bear on the study of neighborhood and the health of older persons. Using data from the Project on Human Development in Chicago Neighborhoods-Community Survey, the Metropolitan Community Information Center-Metro Survey, Medicare Claims, and out-patient, hospitalization, and geocoded health services data, we ask: 1) Are structural features of urban neighborhoods--concentrated poverty, concentrated affluence, residential stability, ethnic heterogeneity, and age structure associated with the health status of older residents?; 2) Are neighborhood social processes--collective efficacy, social networks, social norms, and physical/social disorder associated with the health of older residents?; 3) is the health services infrastructure of the neighborhood associated with the health of older residents?; and 4) Does the health of older residents affect the ability of the community to sustain social networks and develop collective efficacy? This project goes beyond current research in four ways. First, it extends existing research on neighborhood context and the health of older adults by exploring theoretically informed mechanisms with multi-level statistical tools. Second, it incorporates an understudied area in the neighborhood effects literature--the role of health services and access to care. Simultaneously examining the effects of neighborhood context and health services could enhance our understanding of individual-level racial/ethnic and socioeconomic disparities in health. Third, it acknowledges that the relationship between neighborhood and health is both reciprocal and dynamic. Fourth, it provides a unique opportunity to examine interactions across a number of levels (e.g., individual-neighborhood, neighborhood-health services infrastructure). This project combines perspectives from sociology and health services research; it bridges these disciplines to formulate research that addresses a set of questions vital to both fields and to aging-related policy.

Grant: 5R01AG017548-03
Program Director: SHRESTHA, LAURA B
Principal Investigator: CHRISTAKIS, NICHOLAS A MD
Title: Relationship of Morbidity and Mortality Between Spouses
Institution: HARVARD UNIVERSITY (MEDICAL SCHOOL) BOSTON, MA
Project Period: 2001/09/30-2006/12/31

DESCRIPTION (provided by applicant): Employing the perspective and methods of the demography of aging, we propose to examine the relationship between the morbidity and mortality of spouses. We ask questions about how the morbidity and mortality of one spouse, and the timing and nature of that morbidity and mortality, affects the morbidity, mortality, and timing and nature of morbidity and mortality in the other spouse. For example, is the hazard of death in one spouse (the "proband") increased by illness or death in the other spouse? If so, how does the proband's hazard of illness or death change over time after the onset of illness or death in spouse? How do these effects vary according to the type of severity or duration of the spouse's morbidity? Do particular illnesses in spouses place probands at particularly high risk of development illness or dying themselves? What role do socio-demographic factors play in all these effects? To address these questions most effectively, we will create a new panel data set with demographics socioeconomic, and health information about one million elderly married couples followed up to ten years. Using a variety of even history and fixed effects methods, we will conduct four main analyses. First, we will evaluate morbidity in one spouse influences mortality in the other. We hypothesize that individuals married to unhealthy spouses will have worst mortality than those married to healthy spouses, and that the longer the spouses is ill, the greater the effect. We also hypothesize the certain types of spousal morbidity (e.g. those that most compromise activities levels) will be worse for probands. Second, we will reevaluate the widower effect (i.e. the increased tendency of the bereaved to die), but we will; adjust for the health of both spouses prior to widowhood; examine it's temporal shape in detail; and assess its dependence on socioeconomic factors. Third, we will evaluate how morbidity in one spouse influences morbidity in the other. Are healthy spouses better able than unhealthy spouses to provide health benefits in marriage? Four, we will evaluate the impact of widowhood on the morbidity, and not just mortality, of bereaved spouses. Our work advances the demographics of aging by; closely examine how an individual's morbidity and mortality are affected by the presence or absence of spousal support; focusing on cause-of-death specific aspects of demographics phenomena; examine theoretically interesting sub-populations along gender, race, socioeconomic, and health status lines; and shedding light on the mechanisms of inter-spousal health effects. Our work also has policy implications in that it; supports more accurate projections of the health burdens in the elderly; facilitates targeting of support services to the growing numbers to the widowed elderly; and addresses important populations, such as minorities the poor, the oldest old, those with dementia, and caregivers.

Grant: 5R01AG019827-03
Program Director: SHRESTHA, LAURA B
Principal Investigator: COVINSKY, KENNETH E MD
Title: Prognosis/Risk Indices for Function/Mortality in Elders
Institution: NORTHERN CALIFORNIA INSTITUTE RES & SAN FRANCISCO, CA
EDUC
Project Period: 2001/09/30-2004/08/31

The goal of this project is to develop and validate two prognostic indices that will stratify community living elders into groups according to risk for two outcomes: mortality and functional deterioration. Our results will be important to efforts to improve outcomes in older people because prognostic indices facilitate efforts to improve healthcare on the clinical level (physician counseling of patients), the policy level (risk adjustment and comparing outcomes across providers), and the public health level (evaluating the effect of a risk factor on outcomes). In spite of the important role prognostic indices could play in improving outcomes in older people, there are few appropriately validated indices available for use in general groups of community-dwelling elders. This project is guided by a conceptual framework that recognizes that outcomes in older people are the result of multiple domains of risk that interact together. These domains include demographic factors (age and gender), biomedical factors (disease), functional status (physical, cognitive, and psychological), and social factors (social support, ethnicity and SES). Our consideration of multiple domains that are clearly important to outcomes in the elderly will be an innovative component of this study. We will use a unique database of 7447 subjects (age less than or equal to 70) compiled from the AHEAD study to develop and validate our prognostic indices. This database is unique 166th in terms of the diversity of its subjects and the availability of information on most of the important domains of baseline risk. We will first divide the dataset into derivation and validation components. Next, we will describe the relation of each predictor variable to each outcome (survival time over five years, and increased dependence in ADL function over two years) in the derivation set. Within each risk domain, we will determine the variables that best predict each outcome. Next, we will use multivariate methods to determine which variables independently predict each outcome. We will use these multivariable models to develop a simple point scoring system to stratify subjects into categories at variable risk of each outcome. Finally, we will use the validation set to test the accuracy and transportability of our prognostic indices, as measured by their calibration and discrimination. The results of this project will be prognostic indices useful to clinicians, epidemiologic and health services investigators, and policy makers.

Grant: 1R01AG023347-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: CRIMMINS, EILEEN M PHD
Title: Biological Risk Underlying Education Health Differences
Institution: UNIVERSITY OF SOUTHERN CALIFORNIA LOS ANGELES, CA
Project Period: 2003/09/30-2007/08/31

DESCRIPTION (provided by applicant): This project will explore how differences in educational attainment result in differential patterns of biological risk for a wide range of poor health outcomes. The proposed research will investigate cumulative biological risk profiles that underlie educational differences in rates of disease, disability, and death. Biological risk is conceptualized in this work as a summary of dysregulation and risk across a number of indicators including cardiovascular functioning, metabolic functioning, the inflammatory system, organ system dysfunction, and levels of vitamins and antioxidants. In addition to education, these biological risk factors will be related to a set of demographic, social, behavioral, psychological, health care availability and economic indicators to better understand the sources of observed education-related differences in biological risk profiles. The biological factors will also be included as independent variables in models predicting health outcomes to understand their mediating role between education and more downstream health outcomes. Use of the National Health Nutrition and Examination Surveys I, 11,]II, and IV will allow examination of the relationships between educational attainment and biological risk and a variety of health outcomes for African Americans, Hispanic Americans (largely of Mexican origin), and Non-Hispanic Whites across all adult ages (20 and above) and across a period of time (from 1971 until 2002). The specific aims of the project are to: 1) Clarify the patterns of biological risk across a range of physiologic markers by educational attainment in order to identify the biological risk factors related to the "earlier aging" of people with lower education. 2) Explore mechanisms which mediate education influences on biological risk. 3) Examine the links between education, biological risk, and health outcomes to determine the biological mechanisms that mediate the education/health relationship. 4) Examine changes over time in the patterning of biological risk by education.

Grant: 1R01AG023141-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: FIENBERG, STEPHEN PHD
Title: Modeling Longitudinal Disability Survey Data
Institution: CARNEGIE-MELLON UNIVERSITY PITTSBURGH, PA
Project Period: 2003/09/30-2006/08/31

DESCRIPTION (provided by applicant): Survey data on disability among the elderly are available from several sources, most prominently the National Long Term Care Survey (NLTCS). The NLTCS began in 1982 and now extends over five waves through 1999, making it a rich source of information on possible changes in disability over time. But these data pose challenges for both statistical modeling and the protection of confidentiality of the information provided by survey respondents, especially when the data for individuals are linked across waves. Most statistical approaches used to analyze NLTCS data are based on disability scales that cannot account for the complexity of disability manifestations. Attempts to deal with such complexity include traditional multivariate methods for both discrete and continuous data, and approaches based on the grade of membership model. These methods typically require either making heroic simplifying assumptions or need to be adapted. This project aims to develop new statistical models and approaches for the analysis of such survey data, including the role of sample weights in the use of these models. It also proposes to take a fresh look at the risk of inadvertent disclosure of information on NLTCS respondents and to develop new approaches to protect against disclosure while preserving access to the maximal amount of information in the data required for their proper analysis using the new models and methods.

Grant: 1R01AG021516-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: FREEDMAN, VICKI A PHD
Title: Late-life Health Trends: Disparities and Explanations
Institution: POLISHER RESEARCH INSTITUTE NORTH WALES, PA
Project Period: 2003/05/01-2007/04/30

DESCRIPTION (provided by applicant): Over the past decade, a consensus has emerged that disability prevalence rates have declined among older Americans. Several studies suggest that the prevalence of severe cognitive functioning also may be declining among older Americans. If such declines continue into the future, their effect on the nation's health and economic well-being could be incredibly far-reaching, with potentially more older Americans able to work longer and relatively fewer needing medical and long-term care. Yet the consequences of recent trends in late-life health remain open to debate in part because the direction of future trends remains illusive. Whether these improvements have been experienced widely is also still unclear and the explanations for the declines remain a scientific mystery. The goal of this project is to update and expand our understanding of trends in late-life health. We define health broadly to include chronic conditions and impairments; physical, cognitive, and sensory limitations; and disability. Drawing upon new data from the National Health Interview Survey (NHIS), the Health and Retirement Study (HRS) and its sister survey the Asset and Health Dynamics of the Oldest Old (AHEAD) study, and the Panel Study of Income Dynamics (PSID), the latter a completely untapped source on this topic, we will: Aim I. Update trends in late-life health into the 21st Century. We will focus primarily on trends in the prevalence of late-life health measures but where possible also investigate the underlying incidence, recovery, and mortality processes driving prevalence trends. Aim II. Investigate the extent of disparities in health trends by race/ethnicity, sex, marital status, nativity, and socioeconomic status. By answering whether the gaps in prevalence are narrowing or widening, we will provide insight into future directions in overall trends. Aim III. Investigate the role of experiences earlier in life as a possible explanation for overall trends. In particular, we will focus on changes in early and midlife factors as possible influences driving improvements in late-life health.

Grant: 5R01AG016790-05
Program Director: SHRESTHA, LAURA B
Principal Investigator: GOLDMAN, NOREEN DSC
Title: BIODEMOGRAPHY--HEALTH, SOCIAL FACTORS & LIFE CHALLENGE
Institution: PRINCETON UNIVERSITY PRINCETON, NJ
Project Period: 1999/07/01-2004/06/30

Demographic processes, the social environment, and life challenge are intimately interlocked with functional status and illness. The social environment, encompassing position in social hierarchy as well as linkages within social networks and support systems, affects exposure to challenge and mediates its effects. This biodemographic investigation has two primary goals. First, we propose to elaborate the relationship between life challenge and health, exploring how the social environment affects that relationship. Specifically we will: 1) Identify challenges that are most strongly associated with, and discriminate best between, the preservation and deterioration of health; 2) Examine both the costs and benefits to health of social connection, support networks, instrumental assistance and emotional support, and social activity. We will identify the components that are most important for the maintenance of mental and physical functioning and for mediating the effects of challenge on health outcomes; and 3) Explore the effects of cumulative advantage and cumulative adversity on health taking into account both timing and severity of life events. Second, we propose to explore how our understanding of the relationships among life challenge, the social environment, and health can be enhanced by incorporating biological markers of health and stress. We will: 1) Investigate the extent to which biological markers of stress and chronic illness are related to reports of life events; 2) Examine the associations between the biological markers and data from physicians' examinations and self-reported health status, and explore their links to survival based on data from death certificates and the household registry; and 3) Explore the extent to which the biological markers can explicate the relations among the social environment, challenge, and health. We will use unusually rich, population-based data from a longitudinal study of the elderly. These data have been collected periodically since 1989 and comprise detailed retrospective and current status information on health and on social, economic, and demographic characteristics. We propose to collect biological markers of health and of life challenge from a subset of 1000 of the participants based on physical exams, and assays of blood and urine specimens. Our analytical strategy uses two multivariate procedures: 1) generalized linear models (especially those for limited dependent variables); and 2) grade of membership models. Our use of both techniques will exploit their complementary strengths for answering our research questions.

Grant: 5R01AG015110-06
Program Director: SHRESTHA, LAURA B
Principal Investigator: GOLDSTEIN, MARY K MD
Title: Disutility of Functional Limitations in the Elderly
Institution: STANFORD UNIVERSITY STANFORD, CA
Project Period: 1997/09/30-2006/06/30

DESCRIPTION (provided by applicant): The overriding goal of this project is to assess the cost-effectiveness of health care interventions that improve or prevent deterioration in health related quality of life of the elderly. The absence of well-accepted, validated methods to measure the benefits of improved quality of life often means that such benefits are either undervalued or ignored altogether. We are developing methods to greatly improve the measurement of quality of life changes resulting from the prevention or mitigation of functional limitations. This step may help ensure that health policies place proper value on health interventions that improve the independent functioning of elderly Americans. We plan to use the multimedia preference assessment (utility) software (PALS), developed specifically for computer-inexperienced elders in the current project, ROI AG15110, to estimate the utility for health states of functional impairment of individuals, both with and without functional limitation. We will interview approximately 600 older adults from a random sample stratified by age into two groups: 65 to 74 years, and 75 years or older. We will re-interview approximately 300 of the individuals at one year and two years after their initial interview. We will estimate the impact of an individual's own dependency in Activities of Daily Living (ADLs) on his or her utility rating for health states of functional dependency. In the longitudinal study, we will define the stability of utilities for health states over time, comparing individuals who do with those who do not themselves develop dependencies during that time. We will assess the impact of emotional and general well-being on utility, both between groups and within individuals over time. Using covariates of age, gender, race/ethnicity, and health status, in addition to the individual's ADL status and emotional well-being, we will estimate a prediction model for utility for health states of functional dependency. Finally, by performing cost-effectiveness evaluation of a geriatric evaluation and management (GEM) intervention, we will illustrate the differences in estimates of cost-effectiveness that can be seen using each of several groups as sources of utility data. The preference assessment methods we are developing will make it possible to conduct formal evaluations of treatments whose primary goal is rehabilitation or preservation of function rather than life prolongation. The longitudinal data from individuals who develop ADL dependencies will deepen our understanding of the impact of functional impairments on older adults.

Grant: 3R01AG009775-10S2
Program Director: SHRESTHA, LAURA B
Principal Investigator: HAUSER, ROBERT M PHD
Title: The Wisconsin Longitudinal Study: As We Age
Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI
Project Period: 1991/06/01-2007/03/31

DESCRIPTION (provided by applicant): We propose to continue the Wisconsin Longitudinal Study (WLS) with a major round of data collection, 45 years after the high school graduation of the original 10,317 participants. We want to exploit the unique scientific value of the WLS to pursue a broad agenda of research on social and economic factors in health and aging. We represent diverse scientific fields - sociology, demography, epidemiology, economics, social and cognitive psychology, industrial engineering, neuroscience, social work, psychiatry, nursing, and medicine. Our plan for data collection - of which these proposed surveys are only the first phase - will span many modes: telephone and mail surveys, brain imaging, personal interview, anthropometric measurement, bio-indicators, content analysis of recorded interviews, and linked administrative records. We intend and expect that these new data, along with the rich data presently available from the WLS, will resolve old questions and open new areas of interdisciplinary inquiry about health, aging, and the life course. All WLS data will be released to the research community as soon as they have been collected, cleaned, and documented. We propose one-hour telephone and 48 page mail surveys in 2002-03 of more than 9600 surviving American men and women who were first interviewed as graduating seniors in high school in 1957 and were followed up in 1964, 1975, and 1992; they will be 63-64 years old when they are surveyed. (b) We propose parallel telephone and mail surveys of 7150 randomly selected siblings of the graduates; they vary widely in age and most were first surveyed in 1994; about 2100 were first interviewed in 1977. (c) We propose shorter (30 minute) telephone interviews with spouses (N = 10,150) and widows of graduates and their siblings (N = 850). The WLS is unique as a large scale longitudinal study of adults and their families that will soon cover almost half a century. It is a valuable public resource for studies of aging and the life course, inter-generational transfers and relationships, family functioning, long-term effects of education and of cognitive ability, occupational careers, physical and mental well-being, and morbidity and mortality. Our goal is to extend and enrich our observations of the WLS cohort since their adolescence in ways that will answer important research questions in aging for decades to come.

Grant: 5R01AG009775-11
Program Director: SHRESTHA, LAURA B
Principal Investigator: HAUSER, ROBERT M
Title: The Wisconsin Longitudinal Study: As We Age
Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI
Project Period: 1991/06/01-2007/03/31

DESCRIPTION (provided by applicant): We propose to continue the Wisconsin Longitudinal Study (WLS) with a major round of data collection, 45 years after the high school graduation of the original 10,317 participants. We want to exploit the unique scientific value of the WLS to pursue a broad agenda of research on social and economic factors in health and aging. We represent diverse scientific fields - sociology, demography, epidemiology, economics, social and cognitive psychology, industrial engineering, neuroscience, social work, psychiatry, nursing, and medicine. Our plan for data collection - of which these proposed surveys are only the first phase - will span many modes: telephone and mail surveys, brain imaging, personal interview, anthropometric measurement, bio-indicators, content analysis of recorded interviews, and linked administrative records. We intend and expect that these new data, along with the rich data presently available from the WLS, will resolve old questions and open new areas of interdisciplinary inquiry about health, aging, and the life course. All WLS data will be released to the research community as soon as they have been collected, cleaned, and documented. We propose one-hour telephone and 48 page mail surveys in 2002-03 of more than 9600 surviving American men and women who were first interviewed as graduating seniors in high school in 1957 and were followed up in 1964, 1975, and 1992; they will be 63-64 years old when they are surveyed. (b) We propose parallel telephone and mail surveys of 7150 randomly selected siblings of the graduates; they vary widely in age and most were first surveyed in 1994; about 2100 were first interviewed in 1977. (c) We propose shorter (30 minute) telephone interviews with spouses (N = 10,150) and widows of graduates and their siblings (N = 850). The WLS is unique as a large scale longitudinal study of adults and their families that will soon cover almost half a century. It is a valuable public resource for studies of aging and the life course, inter-generational transfers and relationships, family functioning, long-term effects of education and of cognitive ability, occupational careers, physical and mental well-being, and morbidity and mortality. Our goal is to extend and enrich our observations of the WLS cohort since their adolescence in ways that will answer important research questions in aging for decades to come.

Grant: 1R01AG024051-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: HENRETTA, JOHN C PHD
Title: Family Culture and Intergenerational Allocations
Institution: UNIVERSITY OF FLORIDA GAINESVILLE, FL
Project Period: 2003/09/30-2008/08/31

DESCRIPTION (provided by applicant): Intergenerational transfers occur within a family context, yet most research on the topic is atomistic, focusing on the attributes and behaviors of individuals in the family matrix and not on the family itself. Social norms and behaviors related to familial obligation and responsibility differ across families, distinguishing the transfer behaviors of one family from another and defining the intergenerational culture within which family members act. This research focuses on shared family traits, in addition to more conventional measures of individual kin, to develop a sociological analysis that: a) examines why similarly-configured families differ in their kin exchange behaviors and why individual characteristics have variable effects across families; b) locates research on transfers to older and younger generations within the same conceptual framework; and, c) examines race and ethnic transfer differences across families. Four central questions guide the proposed research: a) Do families differ in their collective orientation to intrafamily transfers, and what characteristics distinguish among families' transfer behavior? b) How similar to each other are the family transfer cultures of the families of orientation of marriage partners? c) How does family change over time affect transfers and is that relationship conditioned by family transfer culture? and d) Are there meaningful cohort differences in family transfers, distinct from differences in family structure? The Health and Retirement Study (HRS) is the major data source. Over the course of the proposed project, seven biennial waves of data (1992-2006) will become available. These data provide dynamic measures of transfer behaviors across as many as four generations of a family and a changing pool of donors and recipients as well as direct and indirect measures of family transfer culture. HRS oversamples of African Americans and Hispanics are adequate for the analyses of ethnic differences. Because the new Mexican Health and Aging Study (MHAS) is modeled on the HRS, comparable data are available to examine intrafamily transfers in a transnational perspective. Multilevel modeling is the primary analytic strategy. Each of the goals listed above requires parallel analyses of parent-to-child and child-to-parent transfers, incorporating a broad range of transfer and family measures, including indicators specific to each spouse/partner.

Grant:	5R01AG020717-02	
Program Director:	SHRESTHA, LAURA B	
Principal Investigator:	KAPTEYN, ARIE	PHD
Title:	Internet Interviewing and the HRS	
Institution:	RAND CORPORATION	SANTA MONICA, CA
Project Period:	2002/06/15-2007/05/31	

DESCRIPTION (provided by applicant): We request funding for a five year project to conduct two Internet interviews with a subset of the respondents to the Health and Retirement Study (HRS), and to set up a separate Internet panel of 1,000 non-HRS respondents, who will be interviewed via Internet twice a year for four years, plus a control group of 500 non-HRS respondents, who will be interviewed once a year by telephone for four years. The data collection and analysis will inform the URS about the potential of Internet interviewing and may serve as a testbed sample for the HRS. Our proposed study covers both methodological issues and substantive issues, foremost in economics, cognitive psychology and epidemiology. In view of the current distribution of Internet access among the population (with access dropping off among older age groups), it is anticipated that in the foreseeable future the HRS will use Internet interviewing alongside other modes. This motivates the mixed mode design of our proposed study. Specifically, we aim: 1. To provide data that will permit a comparative study of the population of Internet interviewees with the population of telephone interviewees with the goal of understanding selection bias; 2. To provide more systematic insight in the properties of Internet interviewing in comparison with other modes of collecting survey data, in particularly among middle aged and elderly respondents; 3. To initiate various experiments in questionnaire and question design, exploiting the potential of Internet interviewing. Special attention will be paid to the role of cognitive functioning and the suitability of the Internet as an interviewing environment; 4. To improve the measurement of various important objective variables such as consumption or wealth; 5. To develop new measurement methods for complex possibly subjective variables such as subjective probabilities, expectations, health histories, risk attitudes and time preference; 6. To make the data generated by these activities available to the research community; 7. To gear the outcomes of the research towards partial and gradual implementation of Internet interviewing in the HRS as of 2004.

Grant: 1R01AG024050-01
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: KEISTER, LISA A PHD
Title: Childhood Family Processes and Adult Wealth Ownership
Institution: OHIO STATE UNIVERSITY COLUMBUS, OH
Project Period: 2003/09/30-2007/08/31

DESCRIPTION (provided by applicant): This application seeks to advance knowledge about the role that childhood family processes play in adult wealth ownership and inequality. Research has documented growing inequalities in wealth ownership in recent decades, but understanding the processes that explain wealth ownership is limited. We propose to develop a general theoretical and empirical model of wealth accumulation that incorporates family processes during childhood with adult attributes and structural elements. We propose to explore the effect of childhood processes, including how parental involvement in children's lives (specific aim 1.1), the allocation of resources among siblings (specific aim 1.2), and race (specific aim 1.3) on adult wealth accumulation. We also propose to examine the effect of individual and family processes on population outcomes. We will investigate relations in accumulation behaviors across generations (specific aim 2.1), link accumulation behaviors to distributional outcomes (specific aim 2.2), and conduct policy experiments and make future projections of family patterns and wealth (specific aim 2.3). We propose to take advantage of survey data that includes both wealth information and family background information (e.g., the National Longitudinal Survey of Youth), detailed case studies, and other data sets that include even more detailed information about wealth ownership (e.g., the Survey of Consumer Finances). We will use traditional regression methods to analyze the longitudinal survey data and case study data, focusing on the effects of parental involvement in children's lives, the allocation of resources among siblings, and racial and ethnic differences in family processes on adult wealth ownership. We will then develop a simulation model that synthesizes data from these and other surveys, from federal estate tax data, and from aggregate sources of information on household behaviors and wealth ownership. The simulation model will allow us to identify patterns that are evident only when information is merged from multiple data sources, and it will facilitate exploration of the effects of individual and family processes on population outcomes such as wealth distribution. The simulation model will also facilitate policy experimentation and projections of future patterns of well-being under various scenarios.

Grant: 5R01AG017889-04
Program Director: SHRESTHA, LAURA B
Principal Investigator: LAUDERDALE, DIANE S PHD
Title: DEATH RATES AND DEATH DATA FOR ASIAN AMERICAN ELDERLY
Institution: UNIVERSITY OF CHICAGO CHICAGO, IL
Project Period: 2000/04/15-2005/03/31

The purpose of this project in the demography of aging is to analyze the mortality experience of Asian American elderly. Death rates, routinely constructed by combining vital statistics and census data, are much lower for the race category "Asian or Pacific Islander (API)" than those for any other race category - less than two-thirds of white rates, and are also lower than death rates in Japan, the country with highest life expectancy. Before concluding that this population is truly healthier, perhaps due to some combination of "healthy immigrant" effect or wealth, problems with data sources must be ruled out. Specifically, there is reason to suspect inconsistencies in race coding between death certificates and the census. Further, the aggregate API category may mask considerable heterogeneity among the six major ethnic groups: Japanese, Chinese, Korean, Vietnamese, Asian Indian, and Filipino Americans. The proposed project would determine age- and sex-specific death rates for those 65+ in each of these six groups using methodology which avoids the pitfalls of combining vital status and census data by employing a single data source for numerators and denominators, the Master Beneficiary Record at the Social Security Administration (SSA). We would identify persons 65+ in each of the six groups using methods for Asian ethnic identification developed in a previous project, based on race code, given name, surname/maiden name and place of birth. SSA death records for identified persons will be compared with death certificate age and race data. We will address these research questions: Do age-specific, sex-specific death rates for the elderly differ among the six major Asian American Populations? Do death rates differ by nativity, i.e. U.S.-born versus foreign-born? How reliable are age and race information on death certificates for Asian American elderly? Does reliability vary by ethnic group, age, nativity, or state of death? What are the cause-specific death rates by ethnic group, and by nativity? This work will allow more accurate projections of longevity for these rapidly growing ethnic populations, foster a better understanding of the relationship between immigration and health, and will identify major causes of mortality in each group, thus informing future epidemiologic research.

Grant: 2R01AG001159-27
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MANTON, KENNETH G PHD
Title: Demographic Study of Multiple Causes of Death
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 1980/04/01-2008/03/31

DESCRIPTION (provided by applicant): Total mortality in the U.S. elderly population has changed significantly due to declines in heart disease, and stroke and, recently, (> 1990) cancer mortality. Research suggests that, even at advanced ages, morbidity and disability can be modified significantly before death - and influence the diseases responsible for death --through lifestyle changes, cohort experiences, changes in medical technology, and changes in health care access. We will examine temporal and cohort changes in the causes of mortality using several types of data - each with characteristic strengths. One type, multiple cause of death data, will soon be available for a long enough period of time (1968 to 2000) that cohort differences in the multiple conditions reported at death can be examined. Data, from longitudinal population studies, provide information on the temporal relation of morbidity and disability changes for lengthy periods prior to death. This adds a crucial intra-individual temporal dimension to analyses of human failure processes at late ages. To analyze these data we will use statistical estimation strategies designed for analyzing combinations of longitudinal demographic and health survey data sets - each with different statistical and measurement properties. With these data and methods we will examine hypotheses about recent (1990-2000) U.S. declines in overall cancer mortality, i.e., what ages does it affect most, which types of cancer changed most, were changes due to prevention or improvements in treatment, how are estimates of cancer mortality declines affected by trends in circulatory disease death? We will also examine hypotheses about changes in the age dominance of specific conditions, e.g., what types of circulatory disease, and co-conditions, emerge at, say, ages 65 to 75 vs. ages 85+. This will produce insights into changes in human mortality processes at late ages where growing numbers of death will occur in the future as the U.S. population ages and the numbers of nonagenarians and centenarians increase. This is important in forecasting life expectancy and the growth of the extreme elderly U.S. population.

Grant: 5R01AG017451-04
Program Director: SHRESTHA, LAURA B
Principal Investigator: MORROW-HOWELL, NANCY L PHD
Title: COMMUNITY LTC SERVICE AND OUTCOMES--BURDEN OF DEPRESSION
Institution: WASHINGTON UNIVERSITY ST. LOUIS, MO
Project Period: 2000/06/15-2004/05/31

DESCRIPTION (Applicant's Abstract): This study addresses fundamental concerns in community long-term care: ensuring appropriate service in response to a broad range of client needs and understanding factors associated with service outcomes. It is expected that a disproportionate number of public CLTC clients have mental health service needs due to depression, given that depression is associated with both physical dependency and low income. Yet virtually no research has addressed the extent of depression among elders in CLTC nor the impact of depression on CLTC service use and outcomes. Further, little is known about the attitudes of CLTC clients regarding mental health services nor the potential role of CLTC in meeting mental health needs. Study aims are to 1) estimate the extent of depression among elders first entering public CLTC and identify factors associated with depression; 2) determine the service demand in CLTC attributable to depression; 3) determine whether depressed elders experience less benefit from CLTC than do non-depressed elders; 4) examine how CLTC responds to the mental health needs of its clients. The proposed research will survey elders at entry to and through one year of service in Missouri's publicly funded, community long-term care system. Study participants will be 60 years of age or older and eligible for public CLTC services because of low income and functional disabilities. Through a telephone-screening interview, we will assess 1,500 new CLTC clients, documenting the extent and type of depression. We will follow 300 depressed elders as well as a random sample of 300 non-depressed elders through one year of CLTC service use. Subjects will be interviewed and service records will be abstracted to determine the service demand attributable to depression and the extent to which CLTC serves as a gateway to mental health services. Outcomes of CLTC (maintenance in community care, quality of life, life satisfaction, and consumer satisfaction with home care) at six months and one year will be compared for depressed and non-depressed clients to determine the extent to which depression affects the outcomes of CLTC services. Community long-term care is a rapidly growing service sector, and the expansion of home and community care is a priority in the development of long-term care policy. This project has the potential to influence program and policy developments in CLTC. Findings will inform the next step testing interventions that integrate CLTC and mental health services.

Grant: 3R01AG020072-02S1
Program Director: SHRESTHA, LAURA B
Principal Investigator: OFSTEDAL, MARY B BA
Title: Comparative Study of Health Transitions in Later Life
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 2001/09/30-2004/08/31

DESCRIPTION (provided by applicant): This proposal is one of two parallel submissions from separate institutions constituting a single project. The Principal Investigators are: Zachary Zimmer, Population Council, and Mary Beth Ofstedal, University of Michigan. The overall goal of the project is to describe and analyze health transitions and health care utilization patterns in four Asian countries undergoing rapid population aging and social and economic change. The study involves comparative analyses of recent panel surveys of older populations in Taiwan (1989-1999), Indonesia (1993, 1997, 1998), the Philippines (1996, 2000-2001), and Singapore (1995, 1999). The Asian panel surveys represent the first nationally-representative, longitudinal data available on the older population for these countries, which span a continuum of socioeconomic development. The comparative approach allows for estimates of how the potential demand for care and support varies between countries (i.e., prevalence and transitions in health outcomes) and how generalizable the links are between socioeconomic status, social support and health that have been observed in many developed nations in the West. The project has three specific aims: (1) to estimate population prevalence levels of health outcomes (functional limitation, chronic conditions, and self-assessed health status), examine recent trends in prevalence levels within countries, determine individual-level transition rates in health status, and estimate active life expectancy; (2) to investigate the effects of socioeconomic status and family network characteristics and social support on health status transitions among older adults; and (3) to assess the roles of access and need as determinants of health care utilization by examining individual-level and community resource characteristics. A variety of analytic techniques will be employed depending on the form of the dependent variable and the goal of the particular analysis. Logistic regression models will be utilized in analyses of prevalence of health outcomes and changes in prevalence levels, and a combination of logistic and linear regression techniques will be used in analyses of health care utilization. Multinomial logit models will be used for analyses of health transitions; active life expectancy will be examined using multistate life tables for different population subgroups, and structural equation models will be used to test for cross-lagged effects of socioeconomic status and health.

Grant: 5R01AG020072-03
Program Director: SHRESTHA, LAURA B
Principal Investigator: OFSTEDAL, MARY B BA
Title: Comparative Study of Health Transitions in Later Life
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 2001/09/30-2004/08/31

DESCRIPTION (provided by applicant): This proposal is one of two parallel submissions from separate institutions constituting a single project. The Principal Investigators are: Zachary Zimmer, Population Council, and Mary Beth Ofstedal, University of Michigan. The overall goal of the project is to describe and analyze health transitions and health care utilization patterns in four Asian countries undergoing rapid population aging and social and economic change. The study involves comparative analyses of recent panel surveys of older populations in Taiwan (1989-1999), Indonesia (1993, 1997, 1998), the Philippines (1996, 2000-2001), and Singapore (1995, 1999). The Asian panel surveys represent the first nationally-representative, longitudinal data available on the older population for these countries, which span a continuum of socioeconomic development. The comparative approach allows for estimates of how the potential demand for care and support varies between countries (i.e., prevalence and transitions in health outcomes) and how generalizable the links are between socioeconomic status, social support and health that have been observed in many developed nations in the West. The project has three specific aims: (1) to estimate population prevalence levels of health outcomes (functional limitation, chronic conditions, and self-assessed health status), examine recent trends in prevalence levels within countries, determine individual-level transition rates in health status, and estimate active life expectancy; (2) to investigate the effects of socioeconomic status and family network characteristics and social support on health status transitions among older adults; and (3) to assess the roles of access and need as determinants of health care utilization by examining individual-level and community resource characteristics. A variety of analytic techniques will be employed depending on the form of the dependent variable and the goal of the particular analysis. Logistic regression models will be utilized in analyses of prevalence of health outcomes and changes in prevalence levels, and a combination of logistic and linear regression techniques will be used in analyses of health care utilization. Multinomial logit models will be used for analyses of health transitions; active life expectancy will be examined using multistate life tables for different population subgroups, and structural equation models will be used to test for cross-lagged effects of socioeconomic status and health.

Grant: 3R01AG016209-03S1

Program Director: SHRESTHA, LAURA B

Principal Investigator: PALLONI, ALBERTO PHD
SOCIOLOGY:SOCIOLOGY-
UNSPECIFIED

Title: HEALTH CONDITIONS OF ELDERLY PUERTO RICANS

Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI

Project Period: 2000/06/15-2004/05/31

DESCRIPTION (Adapted from the Applicant's Abstract): The proposed project will collect and analyze information on health conditions, living arrangements, transfers, and access to and use of health care among older adults (aged 60+) in Puerto Rico. We propose an island-wide, cross-sectional sample survey of target individuals and their surviving spouses or partners. The baseline survey will be complemented by (a) a single follow-up to take place two years after the baseline survey; (b) record linkages with Medicare and other insurance providers; (c) record linkage with certificates of decedents who die between in the inter-wave period; and, (d) a sample of targets' siblings for the analysis of paired survival times. The data the investigators propose to collect can be used to addresses the following goals: (i) to describe health conditions of adults 60+ in general, and of those 80+ in particular, with regard to self-reported health conditions, physical and mental impairment, and functional disability; (ii) to assess the effects of socioeconomic conditions and migration histories on health status, physical and mental impairment, functional disability, rates of institutionalization and mortality risks; (iii) to assess relations between self-reported chronic conditions, functional disability, mortality and institutionalization, and background conditions, including migration experience. (iv) to assess relations between individuals' history of illness, behavioral risks, and shared environments, on the one hand, and chronic diseases, disability, mortality and institutionalization, on the other; (v) to identify risk profiles based on functional limitations, self-reported conditions, and risky behavior and use them as inputs for short-term forecasting of age-patterns of morbidity, disability, and mortality, (vi) to evaluate elderly's access to and use of health care services, including those supplied outside the formal medical establishment; (vii) to investigate the sources, magnitude and direction of intergenerational support, as well as the activity of kin networks, as a function of elderly' health status; (ix) to establish comparisons with information about Puerto Ricans in the US and other Hispanics and, with proper modeling techniques based on spouse and siblings data, to obtain robust estimates of effects of socioeconomic effects and migration experience. This will help to shed light on the seemingly favorable health conditions of Hispanics living in the US (NRC1997).

Grant: 5R01AG016308-03
Program Director: SHRESTHA, LAURA B
Principal Investigator: RAHMAN, MOHAMMED O DSC
Title: SOCIAL NETWORKS AND ADULT SURVIVAL IN RURAL BANGLADESH
Institution: HARVARD UNIVERSITY (SCH OF PUBLIC BOSTON, MA
HLTH)
Project Period: 2001/07/15-2004/06/30

This study will use newly collected, comprehensive data from rural Bangladesh to (a) investigate the impact of social networks on adult and elderly survival and (b) explore the variation in social networks amongst individuals. Its contributions include the following: First, unlike most previous studies which have used ad hoc, atheoretical, uni-dimensional summary network measures to represent social networks, this study will use a theoretically driven, empirically validated, multidimensional model of social networks. Specifically it will examine the relationship of network characteristics to survival within distinct social and kin roles (spouse, sons, daughters, brothers, sisters, other members of the residential compound (the bari), and confidant), recognizing that some roles may be more important than others. Second, it will address concerns about the universality of the relationship between social networks and adult survival across sociocultural settings by examining this issue in the context of a rural developing world setting. Third, the extensive sociodemographic information available will permit us to explore how different individual characteristics such as gender, age, income and education may modify the impact of social ties on survival, an area that has received inadequate attention thus far. Fourth, because of the wide variety of health status indicators available (self-reported and measured), we will be able to control for the confounding effect of prior health in a more comprehensive way than many studies. Fifth, this study will explore the extent to which social networks act as stressors versus buffers. Sixth, we will attempt to gain insight into the mechanisms through which social networks may affect survival, with a special focus on instrumental support exchanges. Finally, this study will use both a cross-sectional and a longitudinal approach to investigate how social networks vary across individuals, focusing on different conceptualizations and facets of networks.

Grant: 5R01AG020247-02
Program Director: SHRESTHA, LAURA B
Principal Investigator: ROBERT, STEPHANIE A PHD
Title: Community Context & Health Over the Life Course
Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI
Project Period: 2002/09/01-2006/07/31

DESCRIPTION (provided by applicant): The overall goal of this study is to better understand how socioeconomic and racial disparities in health, well-being, and mortality are produced and maintained by both community and individual processes over the life course. This study uses multilevel data to examine the relationship between community socioeconomic context, racial segregation, and individual health, well-being, health change, and mortality. The Specific Aims of this study are: 1) To examine how community socioeconomic context and racial segregation are jointly and independently associated with individual health, well-being, health change, and mortality. 2) To examine how community socioeconomic context and racial segregation are associated with individual health, well-being, health change, and mortality independent of individual/family SES, through individual/family SES, and to examine how these relationships are moderated by individual/family SES over the life course. 3) To examine how the relationships between community socioeconomic context, racial segregation, and health, well-being, health change, and mortality vary by age, race, and gender. 4) To create and test a conceptual model that (a) describes the complex pathways through which community context is related to individual health and well-being, including an emphasis on the subgroups for whom these relationships appear most salient, and (b) demonstrates specific pathways that appear to be dominant mediators and moderators of these relationships. This study uses three national studies of adults in the U.S. (Americans' Changing Lives Study--Waves 1, 2, 3, and 4, Midlife in the U.S. Study, and the National Survey of Families and Households--Waves 1 and 2) that each have information on individual and family SES, individual health, well-being, and mortality (2 of the 3 studies). Each also includes information on some of the individual-level pathways (health behaviors, social support, stress, access to health care, perceived neighborhood environment) that may link community context and individual socioeconomic status to health, well-being, health change, and mortality over the life course. Information from the census is matched for respondents in each study to measure the socioeconomic context (from census tracts or zip codes, and counties) and racial segregation (county level) of the communities in which respondents reside.

Grant: 1R01AG024058-01
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: ROGOWSKI, JEANNETTE A PHD
Title: NEIGHBORHOODS AND THE HEALTH OF ELDERLY AMERICANS
Institution: RAND CORPORATION SANTA MONICA, CA
Project Period: 2003/09/30-2008/08/31

This project is coordinated with P50 ES012383, Nicole Lurie, "UNDERSTANDING NEIGHBORHOOD IMPACTS ON HEALTH."

This project investigates how contextual factors, specifically the built and socioeconomic features of neighborhoods, affect the health of elderly Americans. Neighborhood characteristics may influence the health of elderly persons in two principal ways: through direct contemporaneous effects on health status and functioning, or through cumulative effects from earlier points in the lifecourse. Because many neighborhood features are modifiable, identifying changes in those aspects of neighborhood environment with the greatest influence on health could become important in addressing health disparities and improving health overall. Understanding at what points in the lifecourse the neighborhood environment most affects health will further inform interventions to reduce disparities in health and functioning in old age. Unfortunately, there is a paucity of literature on how these contextual factors affect late-life health and functioning. The few existing studies of the elderly are based on small sample sizes drawn largely from confined geographic areas and are thus of limited generalizability. We propose to undertake a national study of the effect of neighborhoods, both built and social environments on health and functioning in old age. The study has the following aims: 1) to measure the effects of the built and social environment on the health and health trajectories of the elderly, with a focus on identifying those neighborhood features that have the most impact on health and are amenable to policy interventions; 2) to understand how and at what points neighborhood environments from earlier in life influence health in old age; and 3) to examine whether neighborhood features have differential impacts on important subpopulations of the elderly, such as men and women, people with low socioeconomic status, and racial/ethnic minorities.

The study will use two nationally representative panel data sets, the Health and Retirement Survey (1992-2002) and the Panel Study of Income Dynamics (1968-2003). These data sets contain large samples of elderly persons that are representative of the elderly population of the United States. Neighborhood characteristics, derived from the work of the Center's data core, will be merged with the individual level data at the census tract level.

Grant: 1R01AG023217-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: RUTAREMWA, GIDEON PHD
Title: MORTALITY DIFFERENTIALS IN UGANDA IN THE ERA OF HIV/AIDS
Institution: MAKERERE UNIVERSITY KAMPALA,
Project Period: 2003/09/15-2006/08/31

DESCRIPTION (provided by applicant) This project proposes to analyze mortality correlates in Uganda during the HIV/AIDS period. The project builds on prior work to analyze the levels, trends and patterns of - childhood mortality, and extends to examine adult mortality and maternal health aspects. The projects seek to take advantage of all existing survey and census data as well as the improved demographic methods to examine an important health and demographic dynamic. This project seeks to contribute to knowledge and expand understanding of the changing Ugandan health and morbidity environment in the face of the HIV/AIDS epidemic. The proposed study will provide empirical analysis of the demographic dimensions of one of the main outcomes of health during the 20 years since AIDS was first reported in Uganda.

Grant:	5R01HD033843-05	
Program Director:	SHRESTHA, LAURA B	
Principal Investigator:	SMITH, JAMES P	BS
Title:	THE NEW IMMIGRANT SURVEY	
Institution:	RAND CORPORATION	SANTA MONICA, CA
Project Period:	2000/09/19-2006/02/28	

We propose to carry out, for the first time, a comprehensive, multi-cohort longitudinal survey of new legal immigrants to the United States based on nationally representative samples of the administrative records, compiled by the U.S. Immigration and Naturalization Service, pertaining to immigrants newly admitted to permanent residence. This New Immigration Survey is a follow-up to a pilot project, which received co-funding from NICHD, NIA, NSF, and INS, that has attempted to evaluate the cost and feasibility of fielding the full survey proposed here. The results obtained from the pilot project have informed all elements of the design for the full New Immigrant Survey. In order to monitor changes across cohorts, new samples of immigrants will be drawn periodically. To monitor adaptation over time, each sample will be interviewed at regular intervals over the life cycle. To assess the immigrants' legacy, information will also be obtained about and from their children, both the immigrant children they brought with them and the U.S. citizen children born to them in the United States. We also will put into the public domain a public-use data base from these surveys that will provide an important source of information to assess U.S. immigration laws, the assimilation and experiences of immigrants, and the impact of immigration in the United States. These data will provide prospective and retrospective information of pre-immigration education, work, health, migration, marriage and fertility histories for newly-arrived immigrants. They will also provide useful information on health, on economic status, on schooling, and on children's well-being from a population heterogeneous in English language abilities and native languages.

Grant: 5R01AG018016-05

Program Director: SHRESTHA, LAURA B

Principal Investigator: SOLDO, BETH J PHD
SOCIOLOGY:SOCIOLOGY-
UNSPECIFIED

Title: MEXICAN HEALTH AND AGING STUDY

Institution: UNIVERSITY OF PENNSYLVANIA PHILADELPHIA, PA

Project Period: 1999/09/30-2004/08/31

DESCRIPTION (Adapted from the Applicant's Abstract): The overall goal of this application is an integrated research agenda, locating research on Mexico's potentially unique old-age health dynamics in a broad socioeconomic context which includes family migration strategies and transfer behaviors. The specific aims of the project are to: examine the aging processes and its disease and disability burden, across multiple health domains, in a large representative sample of older Mexicans; evaluate the effects of individual behaviors, migration history, community characteristics, socioeconomic status and transfers on multiple health outcomes; estimate models of health transitions and assess the effects of socioeconomic status, antecedent behaviors, risk factors, and environmental conditions on the rate and pace of transitions for older Mexicans; compare health dynamics of older Mexicans with comparably aged Mexican-born migrants and second generation migrants using comparable data from the biennial HRS/AHEAD and the NHANES III in order to assess the durability of the purported health advantage of migrants; assess the health of all components of the population from which migrants were selectively recruited, including first-generation Mexican-Americans, migrants who return to Mexico after various length stays in the U. S. and Mexicans with no history of residency in the U. S.; and, consider the ways in which intergenerational transfer systems affect old-age health dynamics in a country where migration is commonplace and remittances may repay prior human and social capital investments or insure against uncertainty in old age. To accomplish these objectives, this application requests support for two waves of data collection (in 2000 and 2002) for the Mexican Health and Aging Survey (MHAS), a nationally representative sample of Mexicans aged 50 and over and their spouse/partners. Approximately 16,830 eligible persons will be identified in conjunction with the 2000 National Employment Survey (Encuesta Nacional de Empleo, ENE). Face-to-face interviews, averaging 80 minutes in length, will collect data on health conditions, functional status, hygienic behaviors, and use of health services (cognitive performance and anthropometric features will be directly measured), attributes of kin and transfer behaviors across the family network; migration history of respondents, children, and siblings; economic measures, and community-level variables. Data files for both waves of data will be publicly distributed. Our analysis methods include multi-state, GoM and other multivariate models of health and transfer outcomes with adjustments for possible migration-selectivity and unobserved heterogeneity.

Grant: 1R01AG023370-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: SOLDO, BETH J PHD
Title: Comparative Approach to SES Gradient: Aging & Selection
Institution: UNIVERSITY OF PENNSYLVANIA PHILADELPHIA, PA
Project Period: 2003/09/30-2007/08/31

DESCRIPTION (provided by applicant): The general goal of this project is to investigate the mechanisms linking education to health transitions, morbidity processes and mortality outcomes at advanced ages. In particular, we investigate the mechanisms underlying the observed gradual decline in the effect of education at older ages comparing this effect in the very different institutional and socioeconomic contexts of the U.S. and Mexico. We emphasize the role of health-related selection processes, the effects of early life events, parental background, and intergenerational transmissions of human capital on health status in later life, and especially at old age. The specific aims of the project are to: develop comparative indicators of health status for older people based in part on biomarkers; develop a cross-national typology of education that goes beyond simple counts of years of schooling; map how the magnitude of the relationship between education and health outcomes changes with age; consider the role of differential selection on the convergence & morbidity and mortality trajectories; and, assess how differences in education imprint on the aging process, its disease burden and disability in the U.S. and Mexico.

Grant: 1R01AG024046-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: SOLDO, BETH J PHD
Title: Family Culture and Intergenerational Allocations
Institution: UNIVERSITY OF PENNSYLVANIA PHILADELPHIA, PA
Project Period: 2003/09/30-2008/08/31

DESCRIPTION (provided by applicant): Intergenerational transfers occur within a family context, yet most research on the topic is atomistic, focusing on the attributes and behaviors of individuals in the family matrix and not on the family itself. Social norms and behaviors related to familial obligation and responsibility differ across families, distinguishing the transfer behaviors of one family from another and defining the intergenerational culture within which family members act. This research focuses on shared family traits, in addition to more conventional measures of individual kin, to develop a sociological analysis that: a) examines why similarly-configured families differ in their kin exchange behaviors and why individual characteristics have variable effects across families; b) locates research on transfers to older and younger generations within the same conceptual framework; and, c) examines race and ethnic transfer differences across families. Four central questions guide the proposed research: a) Do families differ in their collective orientation to intrafamily transfers, and what characteristics distinguish among families' transfer behavior? b) How similar to each other are the family transfer cultures of the families of orientation of marriage partners? c) How does family change over time affect transfers and is that relationship conditioned by family transfer culture? d) Are there meaningful cohort differences in family transfers, distinct from differences in family structure? The Health and Retirement Study (HRS) is the major data source. Over the course of the proposed project, seven biennial waves of data (1992-2006) will become available. These data provide dynamic measures of transfer behaviors across as many as four generations of a family and a changing pool of donors and recipients as well as direct and indirect measures of family transfer culture. HRS oversamples of African Americans and Hispanics are adequate for the analyses of ethnic differences. Because the new Mexican Health and Aging Study (MHAS) is modeled on the HRS, comparable data are available to examine intrafamily transfers in a transnational perspective. Multilevel modeling is the primary analytic strategy. Each of the goals listed above requires parallel analyses of parent-to-child and child-to-parent transfers, incorporating a broad range of transfer and family measures, including indicators specific to each spouse/partner.

Grant: 1R01AG019802-01A2
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: STAFFORD, FRANK P PHD
Title: Life Course Wealth, Health, and Mortality in the PSID
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 2003/09/01-2007/05/31

DESCRIPTION (provided by applicant): Begun in 1968, the Panel Study of Income Dynamics (PSID) is a longitudinal study of a representative sample of U.S. individuals and their families in which they reside. It emphasizes the dynamic aspects of economic and demographic behavior, but its content is broad, including sociological, psychological, and physical health measures. The PSID is the longest running national panel on family and individual dynamics, and it has consistently achieved unprecedented re-interview response rates of 96-98%. Due to an innovative design choice by the study's initial research planners, the PSID continues to follow and interview adult children of sample families when they leave home. By continually adding these young families, the study maintains a representative sample of the U.S. population, provides measures of social and health conditions over the full life course, and facilitates the study of intergenerational connections of wealth, socioeconomic status, and economic behavior. With the enhancements described in this proposal, the PSID is poised to become the only data ever collected on life course and multigenerational health in a long-term panel representative of the full U.S. population. To achieve these objectives, this application proposes to collect, process, and disseminate data for three main survey modules that would be included in the 2003 and 2005 interviews: (1) health and mortality, (2), wealth and active savings, and (3) pensions. These three modules represent both continuations of question sequences already introduced into the PSID and expansions of them.

Grant: 1R01AG024045-01
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: SZINOVACZ, MAXIMILIANE E PHD
Title: Intergenerational support structures and pathways
Institution: EASTERN VIRGINIA MEDICAL SCHOOL NORFOLK, VA
Project Period: 2003/09/30-2008/08/31

DESCRIPTION (provided by applicant): With the aging of the population, the number of individuals requiring care is expected to increase dramatically during the next decades. Elder care puts considerable burden and strain on the caregiver. Many family caregivers thus require support by others, often other family members. Indeed, data from a recent national survey indicate that 73% of all family caregivers received assistance from other family members, suggesting that care is best understood as family system effort. Although past research provides a glimpse at the composition of family care systems, the coordination and shifting of responsibilities among family members and of changes in their involvement (e.g., care hours) remain poorly understood. One premise of our project is that the viability of family care systems is contingent on their flexibility, that is, their ability to restructure in response to the ever-changing needs and demands of caregivers and care recipients. A second premise is that caregiving must be understood as a career, of variable duration, with distinct transition points, and that the predictors of caregiver involvement at early stages may therefore differ from those of caregiver involvement at later stages of a relative's illness. Both the flexibility of care systems and changes in caregiver involvement over time are further expected to have consequences for caregivers, care recipients, and use of formal services or nursing home placement. The main aim of this project is to assess changes in family care systems over time, to examine the predictors of such changes both at the level of the caregiver and of the care system as a whole, and to investigate the impact of such changes on selected outcomes, including well-being of the caregivers and care recipients, the extent of unmet care needs, the use of formal services, and nursing home placement. Our analyses will rely on data from the Health and Retirement and Assets and Health Dynamics of the Oldest Old surveys and rely on statistical methods that are appropriate for multi-level data with endogenous and censored variables from complex surveys. Our results can inform policies and programs designed to enhance the care systems of frail and cognitively impaired elders as well as policies and programs targeting the well being of families and caregivers. They also speak to the future availability of family caregivers in response to changing family structures and caregiving requirements.

Grant:	5R01AG020549-02	
Program Director:	SHRESTHA, LAURA B	
Principal Investigator:	VAUPEL, JAMES W	MOTH OTHER AREAS
Title:	Demographic Analysis of Sardinian Longevity	
Institution:	DUKE UNIVERSITY	DURHAM, NC
Project Period:	2002/09/01-2005/08/31	

DESCRIPTION (provided by applicant): Research is proposed to document and verify a remarkable pattern of low mortality among Sardinian males after age 80 and to explore possible determinants. The proposed research builds on and extends the outstanding AKEA study of Sardinian centenarians. This study reported an unexpectedly low female/male ratio among centenarians (about 2/1) and the presence of extremely old males (105+ and 110+) on Sardinia. Demographers were skeptical. To determine the truth, the demographer Michel Poulain was sent to Sardinia to validate the AKEA data. His careful study suggests that the Sardinian data are reliable. That is, as a result of the AKEA research and the subsequent validation by Poulain, the remarkable survival of Sardinian males now appears to be a fact rather than an artifact of bad data. Hence, an international team of demographers and biologists has prepared this application. The proposed research has five specific aims. First, we plan to use detailed vital statistics data for Sardinia and the rest of Italy to determine if there is a special pattern of mortality on Sardinia. Second, as a follow-up of the AKEA study, we plan a major geriatric survey to identify, interview, physically examine, and take blood samples from 800 elderly individuals. Third, we propose meticulous examination of detailed original records to validate alleged long-livers and to compile information about early-life events. Fourth, we intend to analyze DNA from these subjects to determine the frequency of various polymorphisms and haplogroups. Fifth, we aim to apply some specific, advanced methods of demographic and statistical analysis to determine genetic, early-life, and current factors affecting longevity. The data collected will be shared with project and other researchers to undertake many other analyses.

Grant: 5R01AG016661-05
Program Director: SHRESTHA, LAURA B
Principal Investigator: WEINSTEIN, MAXINE A BS
Title: BIODEMOGRAPHY OF HEALTH, SOCIAL FACTORS & LIFE CHALLENGE
Institution: GEORGETOWN UNIVERSITY WASHINGTON, DC
Project Period: 1999/09/01-2004/08/31

Demographic processes, the social environment, and life challenge are intimately interlocked with functional status and illness. The social environment, encompassing position in social hierarchy as well as linkages within social networks and support systems, affects exposure to challenge and mediates its effects. This biodemographic investigation has two primary goals. First, we propose to elaborate the relationship between life challenge and health, exploring how the social environment affects that relationship. Specifically we will: 1) Identify challenges that are most strongly associated with, and discriminate best between, the preservation and deterioration of health; 2) Examine both the costs and benefits to health of social connection, support networks, instrumental assistance and emotional support, and social activity. We will identify the components that are most important for the maintenance of mental and physical functioning and for mediating the effects of challenge on health outcomes; and 3) Explore the effects of cumulative advantage and cumulative adversity on health taking into account both timing and severity of life events. Second, we propose to explore how our understanding of the relationships among life challenge, the social environment, and health can be enhanced by incorporating biological markers of health and stress. We will: 1) Investigate the extent to which biological markers of stress and chronic illness are related to reports of life events; 2) Examine the associations between the biological markers and data from physicians' examinations and self-reported health status, and explore their links to survival based on data from death certificates and the household registry; and 3) Explore the extent to which the biological markers can explicate the relations among the social environment, challenge, and health. We will use unusually rich, population-based data from a longitudinal study of the elderly. These data have been collected periodically since 1989 and comprise detailed retrospective and current status information on health and on social, economic, and demographic characteristics. We propose to collect biological markers of health and of life challenge from a subset of 1000 of the participants based on physical exams, and assays of blood and urine specimens. Our analytical strategy uses two multivariate procedures: 1) generalized linear models (especially those for limited dependent variables); and 2) grade of membership models. Our use of both techniques will exploit their complementary strengths for answering our research questions.

Grant: 5R01AG020638-02
Program Director: SHRESTHA, LAURA B
Principal Investigator: WILLIS, ROBERT J PHD
Title: Internet Interviewing and the HRS
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 2002/04/15-2007/03/31

We request funding for a five year project to conduct two Internet interviews with a subset of the respondents to the Health and Retirement Study (HRS), and to set up a separate Internet panel of 1,000 non-HRS respondents, who will be interviewed via Internet twice a year for four years, plus a control group of 500 non-HRS respondents, who will be interviewed once a year by telephone for four years. The data collection and analysis will inform the HRS about the potential of Internet interviewing and may serve as a tested sample for the HRS. Our proposed study covers both methodological issues and substantive issues, foremost in economics, cognitive psychology and epidemiology. In view of the current distribution of Internet access among the population (with access dropping off among older age groups), it is anticipated that in the foreseeable future the HRS will use Internet interviewing alongside other modes. This motivates the mixed mode design of the proposed study. Specifically, we aim: 1. To provide data that will permit a comparative study of the population of Internet interviewees with the population of telephone interviewees with the goal of understanding selection bias; 2. To provide more systematic insight in the properties of Internet interviewing in comparison with other modes of collecting survey data, in particular among middle aged and elderly respondents; 3. To initiate various experiments in questionnaire and question design, exploiting the potential of Internet interviewing. Special attention will be paid to the role of cognitive functioning and the suitability of the Internet as an interviewing environment. 4. To improve the measurement of various important objective variables such as consumption or wealth; 5. To develop new measurement methods for complex possibly subjective variables such as probabilities, expectations, health histories, risk attitudes and time preferences; 6. To make the data generated by these activities available to the research community. To gear the outcomes of the research towards partial and gradual implementation of Internet interviewing in the HRS as of 2004.

Grant: 5R01AG020063-03
Program Director: SHRESTHA, LAURA B
Principal Investigator: ZIMMER, ZACHARY S MA
Title: Comparative Study of Health Transitions in Later Life
Institution: POPULATION COUNCIL NEW YORK, NY
Project Period: 2001/09/30-2004/08/31

DESCRIPTION (provided by applicant): This proposal is one of two parallel submissions from separate institutions constituting a single project. The Principal Investigators are: Zachary Zimmer, Population Council, and Mary Beth Ofstedal, University of Michigan. The overall goal of the project is to describe and analyze health transitions and health care utilization patterns in four Asian countries undergoing rapid population aging and social and economic change. The study involves comparative analyses of recent panel surveys of older populations in Taiwan (1989-1999), Indonesia (1993, 1997, 1998), the Philippines (1996, 2000-2001), and Singapore (1995, 1999). The Asian panel surveys represent the first nationally-representative, longitudinal data available on the older population for these countries, which span a continuum of socioeconomic development. The comparative approach allows for estimates of how the potential demand for care and support varies between countries (i.e., prevalence and transitions in health outcomes) and how generalizable the links are between socioeconomic status, social support and health that have been observed in many developed nations in the West. The project has three specific aims: (1) to estimate population prevalence levels of health outcomes (functional limitation, chronic conditions, and self-assessed health status), examine recent trends in prevalence levels within countries, determine individual-level transition rates in health status, and estimate active life expectancy; (2) to investigate the effects of socioeconomic status and family network characteristics and social support on health status transitions among older adults; and (3) to assess the roles of access and need as determinants of health care utilization by examining individual-level and community resource characteristics. A variety of analytic techniques will be employed depending on the form of the dependent variable and the goal of the particular analysis. Logistic regression models will be utilized in analyses of prevalence of health outcomes and changes in prevalence levels, and a combination of logistic and linear regression techniques will be used in analyses of health care utilization. Multinomial logit models will be used for analyses of health transitions; active life expectancy will be examined using multistate life tables for different population subgroups, and structural equation models will be used to test for cross-lagged effects of socioeconomic status and health.

Grant: 1R03AG020652-01A1
Program Director: SHRESTHA, LAURA B
Principal Investigator: BEARD, VICTORIA PHD
Title: Intergenerational Support for the Elderly in Indonesia
Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI
Project Period: 2003/04/01-2005/03/31

DESCRIPTION (provided by applicant): The research analyzes the relationship between individual characteristics associated with family change and the type and level of support adult children provide their elderly parents in Indonesia. Support here refers to money, goods, time and co-residence. Since the 1970s, Indonesia has undergone profound social, economic, and demographic changes that are hypothesized to affect the social organization of the family. One change in the social organization of the family that has been theorized to accompany these changes is the growth of nucleated family structures. In Indonesia, this could have a significant and adverse impact on the well being of the elderly because most support for the elderly takes the form of co-residence. The research analyzes three waves of the Indonesian Family Life Survey (IFLS-1/1993, IFLS-2/1997, IFLS- 3/2000) and anthropological literature to address three specific aims: (1) develop a series of multivariate regression models to examine the relationship between the type and amount of support an adult child provides their elderly parents and key family change characteristics and other socioeconomic and demographic traits, (2) examine the likelihood that an adult child and elderly parent will transition into and out of co-residence between survey waves, and (3) analyze the support an adult child provides their elderly parent(s) with a specific focus on the significance of ethnicity and its associated cultural norms. The study will contribute to our understanding of intergenerational support for the elderly in Indonesia by analyzing the combined effect of structural outcomes of development as viewed through key family change characteristics, standard socioeconomic and demographic traits, and cultural norms. As a result, the proposed study seeks to provide insight into how these different forces create, maintain, and transform support relationships. The proposed study will result in submission of three manuscripts and the development of an R01 proposal. Future work will focus on (1) the perspective of the elderly parent; (2) additional independent variables based on sibling characteristics; and (3) examination of subjective, objective, and community health variables.

Grant: 1R03AG022075-01
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: BRASS, LAWRENCE M MD
Title: Impact of Aging on Stroke Care: A National Perspective
Institution: YALE UNIVERSITY NEW HAVEN, CT
Project Period: 2003/09/01-2005/08/31

DESCRIPTION (provided by investigator): Our goal is to examine the impact of aging on stroke care in the United States. Our application proposes secondary analysis of data collected as part of the National Stroke Project. The National Stroke Project was part of a Center for Medicare and Medicaid Study (CMS) program (formerly known as the Health Care Financing Administration (HCFA)) to look at quality indicators for stroke care by state. The specific aims and proposed analyses of this R03 application go beyond the analyses proposed, and funding available for, the National Stroke Project. Our application is ideally suited to PA Number: PA-01-082 (Data analysis and Archiving in Demography, Economics, and Behavioral Research on Aging). The R03 Award will permit an analysis of the National Stroke Project database related to measuring and understanding the age-related disparities in stroke care across the United States. Our analyses will yield the first national picture of how age influences the care of elderly patients admitted to the hospital with stroke. In addition, the results of this R03 will provide new analyses critical to informing the design and content of a planned RO1 linking processes of inpatient care from the elderly patients included in the National Stroke Project with long-term outcomes. The objective of this proposal is to provide insight into how aging influences stroke care both directly and through its association with other factors including demographics, clinical co-morbidities, hospital and physician characteristics, and geography. These results will be critical to enhancing clinical decision-making and performance benchmarking. Accordingly we have set specific aims: 1-to determine the influence of age on the management of acute ischemic stroke; 2-to determine if the impact of age on stroke care is different within the 'Stroke Belt'; and 3-to examine whether hospital and physician characteristics contribute to age related differences in stroke care. Some studies have raised questions about how demographic and clinical factors contribute to the variations seen in the care and outcomes of patients with cerebro-vascular disease, but few data are available regarding how these factors specifically affect the use of specific diagnostic techniques and stroke therapies in older patients with stroke. We hypothesize that variations in care exist by age. Moreover, these differences in care will not be explained by differences clinical features or co-morbid conditions associated with aging.

Grant: 5R03AG021009-02
Program Director: SHRESTHA, LAURA B
Principal Investigator: BURKHAUSER, RICHARD V BA
Title: Adding Health Variables to the CNEF
Institution: CORNELL UNIVERSITY ITHACA ITACHA, NY
Project Period: 2002/09/30-2004/08/31

DESCRIPTION (provided by applicant): This proposal seeks funding to provide support for the development, enhancement and assembly of a new database from existing data under the Healthy People 2010 initiative. We propose to make available to the research community new health data from three long-running panel studies: the United States Panel Study of Income Dynamics (PSID), the British Household Panel Survey (BHPS), and the German Socio-Economic Panel (GSOEP). Using these primary data sources we will recode and aggregate them to create a set of health variables measuring equivalent concepts of health in all three countries. These new health variables will be added to other conceptually equivalent data contained in the Cross-National Equivalence File (CNEF). This rich data file will be of value to researchers who study the relationship between health and socio-economic factors in the older age population. We will:

1. update all current CNEF equivalized variables for survey years 2000 and 2001 in the BHPS, survey years 2001 and 2002 for the GSOEP, and survey years 1999 and 2001 in the PSID, 2. expand the set of equivalized variables in the CNEF by creating new comparable health variables from the recently enlarged set of self-reported health and health behavior questions in the BHPS, GSOEP, and PSID, and 3. compare the relative health and economic well-being of the older and younger populations in these modern industrialized societies and to show how health varies within and across socio-economic groups in the three countries.

Grant: 1R03AG022571-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: CORDER, LARRY S PHD
Title: EXCEPTIONAL HUMAN LONGEVITY IN THE NLTCS
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 2003/09/15-2004/08/31

18. Exceptional Human Longevity: The changing pattern of mortality and morbidity among the aged has been exemplified by a consistent pattern of declining disability for nearly two decades accompanied by uneven mortality declines. Both younger and older aged people have experienced improvements in morbidity and mortality. In this context, the most rapid declines in mortality have been observed at exceptionally old ages. While the study of exceptional longevity has focused on mortality registry data and extant demographic models and methods, the study of exceptional healthy longevity requires additional resources in the form of linkage to registries of health service use and surveys which collect health and functional information both across the dimensions of these concepts using widely accepted measurement models and across time using a sampling plan which includes sufficient numbers of exceptionally aged persons for estimation (counts). In addition, national sample surveys corresponding to national registry coverage are most desirable. Among the national population surveys which measure health and function, the National Long Term Care Survey is unique in that it both represents the entire aged population, measures health in detail, and includes large numbers of exceptionally aged persons in the sample design. Indeed, in 1994 and 1999 NLTCS waves, large oversamples of 95+ persons were carried out. One major goal of the project will be to develop information on the persons who eventually attain 95+ in the NLTCS. Health and function histories will be developed over all waves of participation and linked to appropriate registries to identify and understand pathways to exceptional longevity and exceptional healthy longevity. Further, the 1994 and 1999 oversamples will be used to examine recent disability declines at the tail of the survival curve in detail. In particular, it is important to observe that current trends in mortality decline will produce large members of exceptionally aged persons over the next three decades, resulting in a new and distinct population phenomenon. Our specific aims will identify the characteristics and antecedents of this "new" population group as well as the nature of the morbidity/mortality relationship at the tail of the survival curve.

Grant: 1R03AG022953-01
Program Director: SHRESTHA, LAURA B
Principal Investigator: CORDER, LARRY S PHD
Title: Nursing Home Use And Health Composition among U.S. Aged
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 2003/09/15-2004/08/31

DESCRIPTION (provided by applicant): Older Americans are living longer and are generally, in better health than two decades ago. Nonetheless, long-term care expenditures are a major component of health care cost for the elderly, in particular because of the tripling of the oldest-old population age 85 years and older. We propose to define demographic trends in the health and disability composition of nursing home residents in recent years from 1991 to 2001 using information collected by National Nursing Home Surveys (NNHS) conducted in the interval. Nine items concerning activities of daily living, mobility, incontinence, and sight and hearing losses will be used to construct a hierarchy of disability (Grade of Membership analysis). The size of the identified disability groups, their demographic composition, and trends over time will be described. Census data will be employed to define trends in the use of nursing homes over time for the U.S. elderly population. The proposed work builds on and extends work already completed for years 1973 to 1997. A more detailed picture of recent trends is needed for projection into the near-term future. These descriptive and analytic results may also be employed to examine the recent decline in disability among the aged as well as trends in the overall pattern of morbidity in the aged population. This proposal includes work that effectively extends analyses of a repeating cross sectional survey of extraordinary duration through a period when living arrangements and disability levels are undergoing rapid, apparent change. Both the National Long Term Care Survey (NLTCs) and the Medicare Current Beneficiary Survey (MCBS) show evidence of a disability decline over the period. Continuity of NNHS analyses is essential for understanding the nature and distribution of the observed recent disability decline among the aged.

Grant: 5R03AG021656-02
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: CRIMMINS, EILEEN M. PHD
Title: Preparation and Distribution of the NUJLSOA
Institution: UNIVERSITY OF SOUTHERN CALIFORNIA LOS ANGELES, CA
Project Period: 2002/09/30-2004/08/31

DESCRIPTION (provided by applicant): The aim of this project is to distribute to the international research community two waves of data from the Nihon University Japanese Longitudinal Study of Aging (NUJLSOA). These nationally representative data of the population 65 years of age and over should provide the empirical basis for numerous studies on a variety of aging issues in Japan, comparing the U.S. and Japanese experiences, and including the Japanese experience among a set of international experiences. The aim is, thus, to provide a significant research resource to the international research community. The NUJLSOA is a longitudinal survey of a nationally representative sample of the population aged 65 and over in Japan. The sample is refreshed with younger members at each wave to retain this aspect at each wave. It was designed primarily to investigate health status of the Japanese elderly and changes in health status over time. The first wave of data was collected in November 1999, the second in November 2001, and a third wave is expected in November 2003. While the focus of the survey is health and health service utilization, other topics relevant to the aging experience are included such as intergenerational exchange, living arrangements, care giving, and labor force participation. The project will produce an English language copy of the survey instruments and English language codebooks for two waves of data. These along with SAS files and data files will be provided on a CD-ROM for distribution to the research community. In order to acquire use of the data, researchers must agree to use the data only for research purposes and not to use data to describe or identify individuals.

Grant: 5R03AG021073-02
Program Director: SHRESTHA, LAURA B
Principal Investigator: FITZPATRICK, ANNETTE L PHD
Title: Survival and Comorbidities after Dementia
Institution: UNIVERSITY OF WASHINGTON SEATTLE, WA
Project Period: 2002/09/01-2004/08/31

DESCRIPTION (provided by applicant) Estimation of survival following the onset of dementia is an extremely important public health issue as America ages. A recent study reported median survival after dementia to be 3.3 years, much shorter than previously estimated. Likewise, the amount of illness that occurs as cognition declines presents a huge burden on family and health care resources alike. Accurate estimation of both of these measures is needed to predict burden for caregivers and on health resources. Recently, the Cardiovascular Health Study (CHS), a multi-site observational cohort established to investigate risk factors for heart disease and stroke in the elderly, completed an ancillary study (funded by NIA) to evaluate dementia in a subset of 3602 of its participants. A total of 480 cases of incident dementia resulted, 330 (68.8 percent) Alzheimer's disease (AD), 52 (10.8 percent) vascular dementia, 76 (15.8 percent) both AD and vascular dementia and 22 (4.6 percent) other types. We propose to utilize these data along with the extensive clinical and surveillance data of the CHS cohort to answer the following questions: (1) What is the duration of survival for individuals classified with incident dementia participating in the Cardiovascular Health Study (CHS)? (2) What are the rates of hospitalization and nursing home admission following onset of dementia? (3) Do these rates differ by type of dementia, age, gender, race or ApoE status? (4) Do these rates differ between individuals evaluated with incident dementia and others of similar age and gender enrolled in CHS? (5) What are the predictors of survival for individuals with incident dementia? We will merge together data from the following sources to achieve our goals: (1) dementia classification, type of dementia, prevalence/incidence status, and date of onset from the CHS Memory Study database; (2) all demographics, risk factor data (including MRI and neurologic symptoms) and cognition scores from the CHS clinic database; (3) date and cause of death, status at end of follow-up, and all hospitalization data from the CHS Events database; and (4) nursing home information from HCFA MEDPAR files. Cause of death and hospitalization diagnoses will be coded to meet analytic needs. Hospital and death records already collected, will be accessed and abstracted for additional information as needed. Analyses will include calculation of length bias (if present), estimation of median survival and diagnosis-specific rates of hospitalization and nursing home admission by selected demographics and type of dementia. Cox proportional hazards regression will be used to identify predictors of survival after onset of dementia. We will also continue to compile datasets and support use of the data for study collaborators. The strengths of this application include the breadth of data already available for the CHS cohort, the inclusion of well-documented incident cases of dementia, and up-to-date surveillance. This application will support continued analyses of an important database designed to provide valuable research for the prevention and impact of dementia in this country.

Grant: 1R03AG021655-01A1
Program Director: SHRESTHA, LAURA B
Principal Investigator: GREEK, APRIL A PHD
Title: Active Life Expectancy by Sex, Race-Ethnicity, Education
Institution: BATTELLE CENTERS/PUB HLTH RES & SEATTLE, WA
EVALUATN
Project Period: 2003/09/15-2005/08/31

DESCRIPTION (provided by applicant): The proposed project will help to clarify the process by which mortality and functional health combine to determine differences in total, active and inactive life expectancy by age, gender, race-ethnicity and education for the U.S. population 51 years of age and older. It will lead to increased knowledge regarding the length of life spent in different states of function and transitions between functional states which have important policy implications given pending increases in the older population, and particularly toward an increased understanding of the special needs of disadvantaged groups. Data from the Health and Retirement Study (HRS) and the Medical Expenditure Panel Survey (MEPS) will be applied. Sufficient data are available to examine disparities for Hispanics, African Americans, and non-Hispanic whites. The proposed project will make the following contributions. (1) Evaluate alternate measures of functional health across age, sex, race-ethnicity and education groups, and the impact of the type of measure on conclusions regarding disparities in functional health. (2) Calculate estimates of active life expectancy by age, sex, race-ethnicity and education with nationally representative data from 1996-2002. (3) Provide the first estimates of active life expectancy based on longitudinal data that include persons in middle ages and separate estimates for Hispanics. (4) Evaluate whether there is evidence of bias associated with the assumption of a single transition between interviews by comparing results of traditional panel and embedded Markov chain methods, and examine whether there are systematic differences in estimates of transitions across sex, race-ethnicity and education groups based on the two methods. (5) Examine the impact of interval duration and missed transitions in functional status on estimates of active life expectancy derived from panel data under the two methods listed above. (6) Apply microsimulation and bootstrapping techniques to estimate sampling variation and confidence intervals. With the sample including data for individuals at the tip of the Baby Boom generation (born 1947 and earlier), the information derived from the proposed study will help to plan for the pending increases in the older population.

Grant: 5R03AG021001-02
Program Director: SHRESTHA, LAURA B
Principal Investigator: LAMB, VICKI L MS
Title: Food Programs and Nutritional Support of the Elderly
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 2002/09/15-2004/08/31

DESCRIPTION (provided by applicant): The major focus of this exploratory study is on nutritional programs and support, and their effects on risks of institutionalization, hospitalization and mortality. The analyses will use the National Long Term Care Survey (NLTCs), linked Medicare records, and additional data to characterize available nutritional support programs at the local and state level. The NLTCs is a large nationally representative longitudinal survey of health and disability of the US population aged 65 years and older. Questions on nutritional status (participation in Elderly Nutritional Programs, weight and physical activities) were added in 1994. A food frequency questionnaire (FFQ), a series of questions about patterns of food consumption, was added in 1999. This study will focus on the last two waves of the NLTCs, which contain this nutritional information, to pursue the following specific aims: Aim 1. To model participation in Elderly Nutrition Programs (ENPs: home delivered meals, and congregate meals), and the food stamp program among those eligible for such programs. We will estimate probit models that will be used to adjust for the propensity to participate in these programs. Aim 2. To model whether those participating in the ENPs and/or receiving food stamps in 1994, compared with those in other nutritional support arrangements, have reduced risks of institutionalization, hospitalization and mortality between 1994 and 1999. We will use hazard models to estimate the risk of these health outcomes. Aim 3. To model patterns of dietary intake in 1999, using a modified short FFQ, to explore the impact of current receipt of ENP services. Models of dietary intake will be estimated in two ways: k-means clustering, and grade of membership clustering. Regression models will be used to estimate the effects of receipt of nutritional services, health, sociodemographic and location correlates. This study will generate important hypotheses to be examined in future research on the effect of nutritional programs on elderly health outcomes, and the role of nutritional support programs as a significant factor in the provision of community based long-term care.

Grant: 1R03AG021137-01A1
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: MATTHEWS, SARAH H PHD
Title: Distribution of Lineage Structures in the US Population
Institution: CLEVELAND STATE UNIVERSITY CLEVELAND, OH
Project Period: 2003/09/30-2004/08/31

DESCRIPTION (provided by applicant): The aim of this research is to identify the distributions of various lineage structures in the United States population in order to ascertain the degree to which they match the assertions about change made by gerontologists and demographers. We consider two types of lineage structure. Specifically, how prevalent are "bean pole" families? What is the distribution of the population into age-gapped, age-condensed, and truncated lineages? Most discussions of lineage structures focus on changes brought about by increased life expectancy and decreased fertility. Little research, however, has investigated how prevalent various structures are or how they affect intergenerational ties as they relate to support for old parents. The project will use Wave 1 (1987- 1988) and Wave 2 (1992-1994) of the National Survey of Families and Households, a panel study of a representative sample of the U.S. population aged 19 and older. Lineage structures will be categorized in two ways, first with respect to depth and size of generations to ascertain the prevalence of bean pole lineages in the population. Second, three-generations lineages will be categorized into 12 types that represent age-gapped, age-condensed, and truncated lineages as well as those which do not fall neatly into these three types. The relationship between the lineage type and race/ethnicity and social class will be described. Last, lineage type will be used in analysis as an independent variable to address the broad question of whether lineage type is associated with support for elderly parents. If there is evidence that lineage structure is a useful variable, recommendations will be made about data collection in future research.

Grant: 1R03AG021609-01
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: SAITO, YASUHIKO PHD
Title: Prepartaion and Distribution of the NUJLSOA
Institution: NIHON UNIVERSITY TOKYO,
Project Period: 2003/06/15-2005/05/31

DESCRIPTION (provided by applicant): The aim of this project is to distribute to the international research community two waves of data from the Nihon University Japanese Longitudinal Study of Aging (NUJLSOA). These nationally representative data of the population 65 years of age and over should provide the empirical basis for numerous studies on a variety of aging issues in Japan, comparing the U.S. and Japanese experiences, and including the Japanese experience among a set of international experiences. The aim is, thus, to provide a significant research resource to the international research community. The NUJLSOA is a longitudinal survey of a nationally representative sample of the population aged 65 and over in Japan. The sample is refreshed with younger members at each wave to retain this aspect at each wave. It was designed primarily to investigate health status of the Japanese elderly and changes in health status over time. The first wave of data was collected in November 1999, the second in November 2001, and a third wave is expected in November 2003. While the focus of the survey is health and health service utilization, other topics relevant to the aging experience are included such as intergenerational exchange, living arrangements, care giving, and labor force participation. The project will produce an English language copy of the survey instruments and English language codebooks for two waves of data. These along with SAS files and data files will be provided on a CD-ROM for distribution to the research community. In order to acquire use of the data, researchers must agree to use the data only for research purposes and not to use data to describe or identify individuals.

Grant:	5R03AG021596-02	
Program Director:	SHRESTHA, LAURA B	
Principal Investigator:	SASTRY, NARAYAN	PHD
Title:	Residential Mobility and Tracking of Adults	
Institution:	RAND CORPORATION	SANTA MONICA, CA
Project Period:	2002/09/30-2004/08/31	

DESCRIPTION (provided by applicant): The Los Angeles Family and Neighborhood Survey (L.A.FANS) is a new longitudinal study of adults, children, and 65 neighborhoods in Los Angeles County. L.A.FANS provides a unique opportunity to study important socioeconomic and health-related behaviors and outcomes among adults and elderly, with a particular focus on the effects of neighborhood social and physical environments. The first wave of the L.A. FANS (L.A.FANS-1) was completed in early January 2002. Wave 2 of the survey (L.A.FANS-2) will be fielded beginning in spring 2004. In this R03 application, we propose to conduct an interim tracking study (ITS) of Wave 1 adult respondents in 2003. The ITS will allow us to: (1) assess strategies for locating and recontacting adult respondents from L.A.FANS-1 and update contact information for respondents who are found in order to maximize recontact and response rates in Wave 2 and (2) analyze patterns of individual residential mobility and migration and of neighborhood turnover during the interval between L.A.FANS- 1 and the ITS, and investigate the determinants of attrition and nonresponse in the ITS. The results of this study will have an important impact on the design and success of LA.FANS-2. Data from L.A.FANS-1 and ITS will also be used to investigate the determinants of individual residential mobility and migration among adults and the elderly and the determinants of residential turnover in Los Angeles neighborhoods.

Grant: 1R13AG021466-01A1
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: HORIUCHI, SHIRO PHD
Title: INCREASING LONGEVITY: CAUSES, CONSEQUENCES AND PROSPECTS
Institution: ROCKEFELLER UNIVERSITY NEW YORK, NY
Project Period: 2003/07/01-2004/06/30

DESCRIPTION (provided by applicant): This is an application for funds to support a scientific meeting organized by the Laboratory of Populations at the Rockefeller University and the Committee on Longevity and Health of the International Union for the Scientific Study of Population (IUSSP), in collaboration with United Nations Population Division. This meeting will focus on the increase in human longevity, in particular, the lengthening of survival at old ages. A substantial decline in old-age mortality started in many economically developed countries during the third quarter of the twentieth century, and increased the oldest-old population. The objective of this meeting is to review and discuss latest empirical findings and theories about trends, causes, differentials and future prospects of the longevity expansion, as well as the quality of life of the oldest old, thereby stimulating and encouraging further investigation. Although the decline of old-age mortality has been widely publicized as a demographic fact, our understanding of why the decline has occurred is limited. It is possible to develop a long list of factors that might have contributed to the lengthening of old-age survival, but relative importance of those factors and causal pathways through which many of the factors exerted their effects remain unclear. This meeting will discuss (1) recent trends of old-age mortality decline and old-age health improvement, (2) major causes of the old-age mortality decline, (3) future prospects of old-age mortality decline, and (4) well-being of the oldest old in the context of old-age survival expansion. This meeting will be held at the Rockefeller University in the New York City on October 20-22, 2003. 27 papers will be presented in three days and selected papers will be edited and compiled for publication.

Grant: 5R13AG018327-04
Program Director: SHRESTHA, LAURA B
Principal Investigator: GOLDMAN, DANA P PHD
Title: RAND MINI MEDICAL SCHOOL FOR SOCIAL SCIENTISTS
Institution: RAND CORPORATION SANTA MONICA, CA
Project Period: 2000/09/15-2005/08/31

If awarded, this conference grant would support a MiniMed School for Social Scientists as a forum to help social scientists learn, understand, and interpret medical knowledge relevant to their research. Each year, MiniMed would invite eight speakers and 15 participants for two days of lecturers on biomedical topics. Another 30 participants would be invited with their own funding (with meals and supplemental materials provided by the conference). The conferences would be held each Summer from 2000 to 2004 at the RAND facilities in Santa Monica. The award would support staff time devoted to organizing MiniMed each year and related support. Because of the importance of MiniMed to RAND's mission, RAND would also share part of the funding costs.

Grant: 1R13HD045300-01
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: ROGERS, ANDREI PHD
Title: Conference on the Indirect Estimation of Migration
Institution: UNIVERSITY OF COLORADO AT BOULDER BOULDER, CO
Project Period: 2003/09/15-2005/08/31

DESCRIPTION (provided by applicant): This conference on methods for the indirect estimation of migration will be convened to bring together in Colorado an international network of collaborating scholars in order to launch an international comparative assessment of new methods for inferring place-to-place migration flows in settings where such data are inadequate, incomplete, or unavailable. The term "indirect estimation" is used in demography to describe inferential techniques that produce estimates of a certain variable on the basis of data that may only be indirectly related to its value. With the future elimination of the "long form" questionnaire from U.S. decennial censuses and its replacement by a smaller continuous monthly sampling survey, students of U.S. territorial mobility will at times find it necessary to deal with inadequate, missing, or possibly inaccurate "small sample" data on migration by adopting such indirect methods of estimation. The countries to be represented at the proposed conference are: Australia, Canada, Italy, the United States, Brazil, Indonesia, and Mexico.

Grant: 3R37AG011761-10S1
Program Director: SHRESTHA, LAURA B
Principal Investigator: LEE, RONALD D PHD SOC SC/REL
DI:ECONOMICS, OTHER
Title: ECONOMIC DEMOGRAPHY OF INTER AGE TRANSFERS
Institution: UNIVERSITY OF CALIFORNIA BERKELEY BERKELEY, CA
Project Period: 1994/04/20-2005/03/31

Resources are reallocated across age and over time for many reasons, including the need to provide for childhood and old age; impatience to consume; the interest rate incentive for waiting to consume; the desire to leave bequests; the wish to hedge against risk; the desire to invest in children; the ability of parents to appropriate the labor services of their children; and the uncertainty of survival. Aggregate reallocations across age have never been studied in a comprehensive way, theoretically or empirically; this project aims to do so, building on work in mathematical demography, aging, economic demography, and overlapping generation models. The project will show that there are only four general types of age reallocation system, of which only three types appear important: capital accumulation, credit transactions, and interage transfers. Properties of each type of system will be studied. Each system generates average age specific wealth, the difference between the present value of expected future allocations into the system and receipts from it. However, when averaged over the population as a whole, aggregate credit must be zero, and the total societal demand for wealth, W , must be met by total holdings of capital, K , and transfer wealth, T . Each type of reallocation takes place through three channels: the family, the market, and the public sector. The project uses this framework to integrate selected themes in the literature including the demography of pension systems, overlapping generation models, economic-demography growth models with age structured populations, life cycle savings, bequest theories of savings, consequences of population aging, generational accounting, optimal population growth rates, public sector externalities to childbearing, and effects of demographic change on aggregate saving. Guided by the formal analysis, an accounting framework for measuring these interage allocations will be developed. It will be used to describe and summarize transfers, capital formation, and credit transactions through the family, the public sector and financial markets for the U.S. in various time periods, based mainly on the CES, and for several Third World populations, based on MFLS2 and Living Standards Surveys. Using a synthetic cohort method under steady state assumptions, these estimates reveal patterns of reallocation across ages; provide a decomposition of total age specific and societal wealth; provide comparative static estimates of the effects of population aging from low fertility or from low mortality; indicate whether the net direction of reallocations is upwards or downwards by age for W and each form of T ; and provide other descriptive measures of theoretical and policy interest. Dropping the steady state assumptions, additional empirical analyses develop longitudinal estimates of reallocations. Other work examines the consequences of dynamic (as opposed to comparative static) demographic change operating through the reallocation systems, and calculates probability distributions for the impact of future demographic change in the US on taxes or benefits for public sector transfers.

Grant: 5R37AG011761-10
Program Director: SHRESTHA, LAURA B
Principal Investigator: LEE, RONALD D. PHD SOC SC/REL
DI:ECONOMICS, OTHER
Title: ECONOMIC DEMOGRAPHY OF INTER AGE TRANSFERS
Institution: UNIVERSITY OF CALIFORNIA BERKELEY BERKELEY, CA
Project Period: 1994/04/20-2005/03/31

Resources are reallocated across age and over time for many reasons, including the need to provide for childhood and old age; impatience to consume; the interest rate incentive for waiting to consume; the desire to leave bequests; the wish to hedge against risk; the desire to invest in children; the ability of parents to appropriate the labor services of their children; and the uncertainty of survival. Aggregate reallocations across age have never been studied in a comprehensive way, theoretically or empirically; this project aims to do so, building on work in mathematical demography, aging, economic demography, and overlapping generation models. The project will show that there are only four general types of age reallocation system, of which only three types appear important: capital accumulation, credit transactions, and interage transfers. Properties of each type of system will be studied. Each system generates average age specific wealth, the difference between the present value of expected future allocations into the system and receipts from it. However, when averaged over the population as a whole, aggregate credit must be zero, and the total societal demand for wealth, W , must be met by total holdings of capital, K , and transfer wealth, T . Each type of reallocation takes place through three channels: the family, the market, and the public sector. The project uses this framework to integrate selected themes in the literature including the demography of pension systems, overlapping generation models, economic-demography growth models with age structured populations, life cycle savings, bequest theories of savings, consequences of population aging, generational accounting, optimal population growth rates, public sector externalities to childbearing, and effects of demographic change on aggregate saving. Guided by the formal analysis, an accounting framework for measuring these interage allocations will be developed. It will be used to describe and summarize transfers, capital formation, and credit transactions through the family, the public sector and financial markets for the U.S. in various time periods, based mainly on the CES, and for several Third World populations, based on MFLS2 and Living Standards Surveys. Using a synthetic cohort method under steady state assumptions, these estimates reveal patterns of reallocation across ages; provide a decomposition of total age specific and societal wealth; provide comparative static estimates of the effects of population aging from low fertility or from low mortality; indicate whether the net direction of reallocations is upwards or downwards by age for W and each form of T ; and provide other descriptive measures of theoretical and policy interest. Dropping the steady state assumptions, additional empirical analyses develop longitudinal estimates of reallocations. Other work examines the consequences of dynamic (as opposed to comparative static) demographic change operating through the reallocation systems, and calculates probability distributions for the impact of future demographic change in the US on taxes or benefits for public sector transfers.

Grant: 5R37AG018444-04
Program Director: SHRESTHA, LAURA B
Principal Investigator: VAUPEL, JAMES W MOTH OTHER AREAS
Title: MORTALITY-SURFACE ANALYSIS OF U.S. AND GERMAN SURVIVAL
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 2000/08/15-2004/06/30

DESCRIPTION (Adapted from applicant's abstract): We propose to compile and make available data on mortality surfaces over age and time for the United States, for regional and black and white sub-populations knot the United States, for East and West Germany and for 15 other countries. Furthermore, we will develop and test innovative demographic methods for modeling mortality surfaces. The data and methods will be useful to many researchers interested in analyzing questions concerning mortality dynamics and comparisons. We will illustrate this by using the data and methods for modeling mortality surfaces. These data and methods will be useful to many researchers interested in analyzing questions concerning mortality dynamics and comparisons. We will illustrate this by using the data and methods to shed light on two demographic puzzles, one concerning the United States and the other concerning Germany. Although death rates in the U.s. are high before age 65, after this age and especially after age 80 people in the United States survive longer than people in Western Europe and Japan. Many factors may contribute to the U.S. advantage; we propose to study three. In particular, we will use mortality-surface data and methods to analyze they hypothesis that health immigrants contribute to the mortality advantage. We will test whether high death rates as younger ages may lower death rates at older ages. Finally, and perhaps most importantly, we will analyze the hypothesis that the Medicare system lowers U.s. mortality at older ages. The German puzzle pertains to the effects of reunification in 1990. Death rates in East Germany fell so rapidly after 1990 that much of the West Germany mortality advantage was eliminated. Improvements were particularly dramatic at oldest-old ages. The narrowing of the mortality gap between East and West Germany began, however, several years before reunification. Hence it is not clear how much the effects of reunification vs. the effects of other factors account for the change: we will use mortality-surface data and methods to analyze this question.

Grant: 1R43AG022734-01
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: WANG, ZHENGLIAN PHD
Title: Demographic Tool & Database for Households Forecasting
Institution: HOUSEHOLD AND CONSUMPTION FORECASTING, I CHAPEL HILL, NC
Project Period: 2003/09/30-2004/08/31

DESCRIPTION (provided by applicant): Our new method for household forecasting, known as ProFamy, has substantial merits as compared to the classic headship-rate method, which is not linked to demographic rates, projects a few household types only without size information, and deals with household "heads" but not other household members. ProFamy uses demographic rates as input and forecasts much more detailed household types and sizes, and living arrangements for all members of the population. We will develop the ProFamy method/program into widely-applicable, user-friendly, and commercialized software, and develop an associated database. The Software and database are useful for business and policy analysis on elderly long-term care needs, housing, energy, cars, durable goods and other home-related products and services, and for faculty and students as a research/teaching tool. To develop the database for non-demographers to conveniently perform households and consumption forecasting, we will establish the model standard schedules of race-sex-age-specific marital status transitions rates and race-age-parity-specific rates of marital and non-marital fertility. The database also includes time series of summary measures of demographic rates, elderly long-term care needs and household consumption. As an illustrative application, we will perform U.S. household forecasting (2000-2050) by race, with a focus on elderly living arrangement and long-term care needs assessment.

Grant: 5R44AG019117-03
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: COTTERMAN, ROBERT F PHD
Title: NATIONAL LONG TERM CARE SURVEY DOCUMENTATION & EXTRACTION
Institution: UNICON RESEARCH CORPORATION COLLEGE STATION, TX
Project Period: 2000/09/30-2004/02/28

The National Long Term Care Survey (NLTCs) contains unique longitudinal microdata on persons aged 65 and older who are chronically impaired. The public-use files distributed by Duke University. Center for Demographic Studies (CDS), have the additional benefit that they are linked to Medicare data available to authorized researchers from the Health Care financing Administration (HCFA) and include corrected weights and other variables calculated by CDS. This project will provide improved access to these data through convenient search and extraction software and an efficient graphical user interface, reformatted documentation that consolidates in one place all information related to a particular variable, and additional variables representing useful combinations of original variables. The software will be distributed on CD-ROMs and run on PCs under Windows 95, 98 NT, and 2000. In Phase I. tests and analyses will be conducted to determine optimum formats for the data files to be placed on the CD-ROMs and the output files. After consultations with CDS that will provide a full understanding of the survey instruments and linked Medicare files, as well as the experience of existing users. we will define the software functions and the layout of the documentation to be produced in Phase II. PROPOSED COMMERCIAL APPLICATION: The National Long Term Care Survey (NLTCs) contains unique longitudinal microdata on persons aged 65 and older who are chronically impaired. The utilities to be developed under this project will provide greatly improved access to these data. Organizations serving the aged and impaired, such as hospitals, HMOs, insurers. actuarial firms, and pharmaceutical companies, may use these data, as may policy makers and researchers with an interest in health care, aging, and related issues.

Grant: 5T32AG000221-12
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: BOUND, JOHN PHD
Title: Training in the Demography and Economics of Aging
Institution: UNIVERSITY OF MICHIGAN AT ANN ARBOR ANN ARBOR, MI
Project Period: 1992/09/01-2007/04/30

DESCRIPTION (provided by applicant): The Population Studies Center (PSC) of the University of Michigan requests a five-year renewal of its training program in the demography and economics of aging. Michigan has one of the oldest population centers in the United States, with a distinguished record in domestic and international population research and training. The University's highly ranked social science departments and professional schools, combined with the unique strengths of the Institute for Social Research, make it an exceptionally strong home for research and training in the demography of aging. The Center's current group of faculty is the strongest and most interdisciplinary in its history, making major contributions in many areas of research in the economics and demography of aging. The proposed training program will provide specialized demographic training to selected pre-doctoral and postdoctoral trainees. The pre-doctoral training program is based in the doctoral programs in sociology, economics, and public health. Students combine the specific doctoral requirements in each discipline with additional specialized training in demography through a combination of formal course work, informal seminars, and a research apprenticeship program grounded in the PSC's rich interdisciplinary environment. Postdoctoral training, which is provided to researchers from a variety of disciplines, is coordinated with a faculty mentor and includes course work, seminars, and collaborative or independent research. This proposal seeks support for 8 pre-doctoral and 4 postdoctoral trainees per year, an increase of 2 pre-doctoral positions from our current grant. A major focus of the added pre-doctoral positions will be on socioeconomic, racial, and ethnic disparities in health, a focus that will be facilitated by the addition of public health into the program. The recent record of the program in terms of recruitment, progress, and professional placement is excellent, with trainees moving into top academic and non-academic positions and producing high-quality research that is published in leading journals in the field.

Grant: 5T32AG000155-15
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: ELDER, GLEN H PHD
Title: DEMOGRAPHY OF AGING AND THE LIFE COURSE
Institution: UNIVERSITY OF NORTH CAROLINA CHAPEL CHAPEL HILL, NC
HILL
Project Period: 1988/07/01-2005/04/30

DESCRIPTION (adapted from the application): The CPC at the UNC-CH requests continued support for its training in the demography of aging and the life course as a special component in a long-standing training program in interdisciplinary population research. This NIA-supported component has emerged as a strong program of modest size that fills a special and relatively neglected niche in the spectrum of programs for training in the demography of aging. In addition to training in more traditional gerontological research and demographic methods, our program provides strong support for the study of aging in the context of life course analysis and from a variety of disciplinary perspectives. The 52 faculty fellows of the CPC hold primary appointments in 15 departments of UNC-CH and provide an unusually rich environment for interdisciplinary research. Center support services for trainees and faculty carrying out social-science-oriented research are truly outstanding. CPC faculty fellows considered core faculty in this application come from the fields of sociology, economics, nutrition, health policy and administration and biostatistics, and this core is growing. Many faculty from other UNC departments with aging interests are available for consultation by our trainees, and the UNC Institute of Aging (IOA) is an important addition to the already-rich resource base. All CPC predoctoral trainees are subject to the same basic application review, but NIA-supported trainees have course requirements in aging as well as population. All CPC predoctoral students are registered in doctoral programs at UNC-CH and must meet departmental, as well as CPC requirements. Each works at least twelve hours per week under the supervision of a faculty fellow preceptor on a research practicum, participates in the weekly CPC interdisciplinary population research seminar and other seminars, meets center requirements for training in the ethical conduct of research, and writes a dissertation approved as relevant to the demography of aging and the life course. Postdoctoral trainees are admitted directly to the Center and receive individualized training from selected faculty preceptors. Key to both predoctoral and postdoctoral training at CPC is a one-to-one relationship between trainee and faculty preceptor and trainee-faculty collaboration on relevant research.

Grant: 5T32AG000129-15
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: HAUSER, ROBERT M
Title: Population, Life Course and Aging
Institution: UNIVERSITY OF WISCONSIN MADISON MADISON, WI
Project Period: 1986/07/01-2007/04/30

DESCRIPTION (provided by applicant): This is a proposal for competitive renewal of a successful pre-doctoral and postdoctoral training program in the demography of aging, health, and the life course. We request support for six pre-doctoral and one postdoctoral positions in order to create a critical mass of trainees and training-related research activity, up from two pre-doctoral and one postdoctoral traineeships in the current period. The UW NIA training program was originally complementary to the outstanding NICHD training program in the Center for Demography and Ecology (CDE), but it has become more focused and independent as it also builds on the resources of the new Center for Demography of Health and Aging. The program benefits from the interdisciplinary integration of research and teaching across the Departments of Sociology, Economics, Human Ecology, and Population Health Sciences, as well as the Institute on Aging, the Institute for Research on Poverty, the LaFollette Institute for Public Policy, and other research centers. The UW NIA program has trained and placed excellent students who are contributing substantially to research and training in the demography of aging. The continuing objectives of the program are to recruit, train, and place students with high potential for careers in the social demography of health and aging. We expect trainee activities to focus on issues of health, inter-generational relations, mid-life development, and rapid population aging, in which faculty resources and research are especially rich and rapidly growing at Madison. To this end, this proposal focuses on a combination of disciplinary and cross-disciplinary training with structured research apprenticeships and continuing training seminars in demography, aging and life course research, and research methods.

Grant: 2T32AG000139-16
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: LAND, KENNETH C PHD
Title: Social, Medical, and Economic Demography of Aging
Institution: DUKE UNIVERSITY DURHAM, NC
Project Period: 1997/05/01-2008/04/30

DESCRIPTION (provided by applicant): The purpose of this predoctoral and postdoctoral research training program is to provide rigorous training in the general fields of social, medical, and economic demography of aging. A major focus is placed on five substantive areas: a) the health and functioning of minority elderly; b) international comparative studies of the health of older populations in both developed and developing countries; c) the medical demography of the oldest old; d) important life course transitions (e.g., family changes, work and retirement, morbidity and disability) that relate to the health and well-being of aging persons; and e) the economics of aging and long-term care. These areas require a core of researchers with doctoral and postdoctoral training who are skilled in state-of-the-art analytic methods and population modeling. The training program is administered through the Center for Demographic Studies, an independent research and training organization of Duke University. Predoctoral training is carried on with the full collaboration of the graduate training programs of the Departments of Sociology and Economics, in which doctorates are awarded. The training takes place at the Center, the Departments, the Center for Health Policy/Law and Management, and the Center for Studies of Aging and Human Development. The facilities at all these sites are utilized by both predoctoral and postdoctoral trainees. Six predoctoral trainees with various background levels will be appointed in each year to conduct aging studies through the completion of their doctoral dissertations, normally four to five years for entering students with BA. degrees. Trainees must fulfill all theory and methods requirements of a Ph.D. in sociology or economics. In addition, all trainees must take required courses in the demography of aging and in demographic models and methods. At the postdoctoral level, two appointments of persons with a Ph.D. or equivalent degree will be made. These postdoctoral trainees typically will be recruited with varied levels of experience for two-year periods of training. They gain first-hand experience under direct supervision of preceptors on major ongoing research projects. They also are provided the opportunity of taking appropriate courses to obtain advanced training knowledge in needed methodological and substantive areas. The program maintains an ongoing Workshop on Demography, Life Course, and Aging that all trainees are expected to attend.

Grant: 5T32AG000246-09

Program Director: PATMIOS, GEORGEANNE

Principal Investigator: LEE, RONALD D. PHD SOC SC/REL
DI:ECONOMICS, OTHER

Title: TRAINING IN THE DEMOGRAPHY AND ECONOMICS OF AGING

Institution: UNIVERSITY OF CALIFORNIA BERKELEY BERKELEY, CA

Project Period: 1995/08/15-2004/04/30

DESCRIPTION (adapted from the application): The UC-B department of demography is one of the foremost training centers in the U.S. and the world. Graduates have been placed at leading universities and research centers in departments of sociology, economics, anthropology, demography, history and statistics. They have strong records of research and publication in demography, and compete successfully for NIH grants. The training faculty includes three members of the National Academy of Sciences, three Sheps Awards winners, two recipients of the John Bates Clark Medal, and holders of many other honors and awards. The faculty includes demographers, economists, a policy analyst, and a public health researcher. Together the 14 faculty hold nine active NIA grants, and have 11 NIA grants pending, plus additional federal grants from NICHD, NCI, and NSF. The program attracts applicants of very high quality from a variety of fields. The economics department is also highly rated and has excellent students. UC-B has had an NIA training grant with two predoctoral slots since 1995. It supports some demography Ph.D. students, and some students from other units such as economics, public policy or public health. The application proposes an increase to four predoctoral slots. Most of the additional positions will be used to support Ph.D. students from other departments who acquire training in demography and aging, while holding steady the number of aging trainees earning the Ph.D. in demography. Aging trainees will receive a solid core of training in analytic demography, as well as in population aging, mortality and related topics.

Grant: 5T32AG000208-13
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: SCHOEN, ROBERT BA
Title: POPULATION STRUCTURE/HEALTH/BIOLOGY OVER THE LIFE COURSE
Institution: PENNSYLVANIA STATE UNIVERSITY-UNIV UNIVERSITY PARK, PA
PARK
Project Period: 1990/07/01-2006/04/30

DESCRIPTION (applicant s abstract): This application is for a five-year continuation of the postdoctoral training program in population and aging at PSU. The program is based on the expertise of 25 members of the training faculty, drawn from the Departments of Anthropology, Biobehavioral Health, Health Policy and Administration, Human Development and Family Studies, Rural Sociology, and Sociology, and from the Women's Studies Program. With an increase in training faculty, the training themes have been broadened to: (1) aging, family, and the life course, (2) aging and health, (3) the formal demography of aging, and (4) the biodemography of aging. The training program is housed in the PRI, and makes use of the extensive resources available. The entire training faculty are PRI Associates, and have an active program of research in one or more of the training themes. Numerous courses, workshops, and seminars on topics in population and aging and on state-of-the-art methodological tools are offered on campus, creating a rich intellectual environment. In recognition of the limited availability of qualified trainees, the program requests only two postdoctoral positions instead of the current four, and envisages five new appointments over the five-year project period. The proposed training emphasizes three complementary elements: (1) enhancement of methodological skills through specialized advanced courses, seminars, and workshops; (2) growth in research skills through collaborative research in ongoing faculty projects and the mentored development of new projects, and (3) professionalization through seminar presentations, participation in professional meetings, the submission and publication of research papers, and the preparation of a research application for submission through the trainee's next institution. The program has a strong, decade long record of effective recruitment, training, and placement of trainees.

Grant:	5T32AG000177-15	
Program Director:	PATMIOS, GEORGEANNE	
Principal Investigator:	SOLDO, BETH J	PHD SOCIOLOGY:SOCIOLOGY- UNSPECIFIED
Title:	Demography of Aging	
Institution:	UNIVERSITY OF PENNSYLVANIA	PHILADELPHIA, PA
Project Period:	1989/09/01-2007/04/30	

DESCRIPTION (provided by applicant): The Graduate Group in Demography (GGD) is requesting a continuation of the NIA training grant in population and aging to the University of Pennsylvania. Three pre-doctoral positions are proposed the same number awarded for the current grant period. Penn is providing unusually broad and rich training at the pre-doctoral level, has been successful with the pre-doctoral program in aging, and is attracting a number of strong students. Although NIA has supported one post-doctoral position for the last five years, we are not requesting funds for post-doctoral fellows. The pre-doctoral training program will continue to be located in the Population Studies Center (PSC) and support students in Demography, Sociology, and Economics. A majority of students in the program will matriculate in the GGD, a unit of faculty members within the PSC with backgrounds in Sociology, Economics, and Demography. The principal aim of the pre-doctoral program is to train independent researchers for leading roles in social demography and population analysis as they relate to aging. This is achieved through: 1) intensive instruction in the methods, theoretical approaches, and empirical substance of demography and allied disciplines; and 2) progressive incorporation of students into faculty research activities. The GGD, with support from the NIA, has demonstrated over the years that it can recruit talented, promising students and prepare them for productive careers. In the past ten years, the GGD has placed 16 Ph.D. s in academic positions. Over the same ten years, 13 pre-doctoral students have been NIA trainees. All 13 have started, or are on their way to, strong careers in population, aging, economics, and/or health research. The recruitment and training of under-represented minorities, African Americans in particular, has been a point of emphasis for the PSC. We document a system of recruitment starting well before college graduation that has been in place for six years and that augurs well for the steady production of minority Ph.D. s in the future.

Grant: 5T32AG000243-09
Program Director: PATMIOS, GEORGEANNE
Principal Investigator: WAITE, LINDA J. BA
Title: SPECIALIZED TRAINING: DEMOGRAPHY & ECONOMICS OF AGING
Institution: UNIVERSITY OF CHICAGO CHICAGO, IL
Project Period: 1994/09/30-2005/04/30

DESCRIPTION (Adapted from the application): This application requests support for an Institutional National Research Service Award to support specialized pre-doctoral and postdoctoral training in the Demography and Economics of Aging as a companion to the current training program in population studies. Training takes place through the Committee on Demographic Training (CDT) of the Population Research Center at the University of Chicago. The CDT emphasizes population economics, social demography, health policy, demography of aging and methodology. As an interdisciplinary committee of economists, sociologists, physicians, anthropologists, and public policy faculty members, the CDT coordinates, administers and supervises training across three departments and two schools at the University of Chicago. The Committee currently has 42 members supervising about 50 pre-doctoral trainees and five post-doctoral fellows. The Population Research Center houses 54 active (25 of them aging-related) and 20 pending (13 of them aging-related) projects, through which trainees obtain research experience, training, and mentoring. This proposal requests funding for six pre-doctoral and two postdoctoral trainees for five years. A program of this size is justified by the large pool of highly qualified students, by student demand for demographic training at the University of Chicago and by the number of training faculty available to trainees and the amount of ongoing research in which trainees can participate.